

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 636884 (9)

1. Corporation Name

FOX CHASE HOMES OF SARASOTA, INC.



Principal Place of Business

1830 MEADOWOOD STREET
SARASOTA FL 34231

Mailing Address

1830 MEADOWOOD STREET
SARASOTA FL 34231

3. Date Incorporated or Qualified
09/20/1979

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DRYMON, JAMES J.
1100 S TAMiami TR STE 201
SARASOTA FL 34236

4. FEI Number

59-2073851

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature of Executive Officer, Director, or Other Authorized Person

Signature of Registered Agent or Other Authorized Person

Date

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
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CITY, ST, ZIP
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NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

SD
BEALS, PATRICIA A
1830 MEADOWOOD ST
SARASOTA, FL 00000
PTD
BEALS, FREDERICK H III
1830 MEADOWOOD ST
SARASOTA, FL 00000

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY - ST - ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY - ST - ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY - ST - ZIP
21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY - ST - ZIP
25. TITLE
26. NAME
27. STREET ADDRESS
28. CITY - ST - ZIP
29. TITLE
30. NAME
31. STREET ADDRESS
32. CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandra B. Mathan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-96

941-925-3888

Print

Do Not Print

CR2E034 (12/95)