FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED									
May 18 1998 8:00am									
Secretary of State									

•	RD G. ALLEN ARCHITECT	` '							
Principal Place of Business Mailing Address							010 11010 11010 110	(6 9 (\$1) 1 0 91	
2364 FRUITVILLE ROAD SARASOTA FL 34237 US			% John Patterson. ESO., 46 North Washington Blvd Suite 1 Sarasota Fl. 34236			DO NOT WRITE IN THIS SPACE			
••		Onlineon 12 dies				3. Date Incorporated or Qualified]
						08/01/1980			
2. Principal P	lace of Business	2a. Mailing Address	F			4. FEI Number	Applied For		
Suite, Apt.	4 40	26 Suite Ant # ato	Suite, Apt. #, etc.			59-2017698	Not Applicable		
22 SUITE, API.	W, BIC.	<u>├</u> ──	27			6. Certificate of Status Desired Fee Required			
City & Stat	θ		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		to Fees	l
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the	current year in	tangible	
24	25	29	30			Personal Property Tax due June 30. Yes			ĺ
	9. Name and Address of Cur	rent Registered Agent		041 11		10. Name and Address of New Registers	d Agent		ļ
	LEN, RICHARD G.			81 Nam	ю				١
	34 FRUITVILLE RD		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)			
SA	rasota fl 34237		83						ł
				83					İ
			1	84 City		F	85 Zip	Code	ĺ
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Florida Statut	es, the at	nove-name	ed corp			ts registered	ł
office or r agent. I a	egistered agent, or both, in the St im familiar with, and accept the ob-	ate of Florida. Such change was obligations of, Section 607.0505, Fl	authorize orida Stal	d by the cutes.	orporati	oration submits this statement for the purpose on's board of directors. I hereby accept the a	ppointment as	registered	
SIGNATURE			E. D. Jane			ed when reinstating) DATE			
12.	Signature: typind or printed name of registered OFFICERS.	AND DIRECTORS	13.	a Agent signa	ure require	ADDITIONS/CHANGES TO OFFICERS A		RS IN 12	6
TITLE	DPST	DELETE			D	D XX		Addition	Ş
NAME	ALLEN, RICHARD G.								7
STREET ADDRESS	AAAA EMAMERIA E ME		1.3 \$1	1.3 STREET ADDRESS					ξ
CITY-ST-ZIP	SARASOTA FL		1.4 CITY - ST - ZIP					_ 3737	S
TITLE		DELETE	2.1 Ti	ILE	P	P Change		Addition	۲
NAME			2.2 N	ME		LLEN, RICHARD G., JR 364 FRUITVILLE ROAD	•		ĺ
STREET ADDRESS			2.3 \$	REET ADDRES	٥ J	SARASOTA FL 34237		,	-
CITY-ST-ZIP				ITY-ST-ZIP	j.	······· · · · · · · · · · · · · · · ·		~~	ļ
TITLE		☐ DELETE	3.1 ¶1			T, ORROW, JANICE	Change	Addition	
NAME			3.2 N		1 -	364 FRUITVILLE ROAD		,	1
STREET ADDRESS				REET ADDRES	- 1 -	ARASOTA FL 34237			1
CITY-ST-ZIP TITLE		DELETE	4.1 (0	TY-ST-ZIP	+-	ARABOTA FE 34237	Change	Addition	ł
NAME			4.2 N		1		C) cylange		1
STREET ADORESS				reet addres	s			}	Į
CITY-ST-ZIP				TY-ST-ZIP	Ĩ				
TITLE		DELETE	5.1 TV				Change	Addition	ĺ
NAME			5.2 N	ME					
STREET ADDRESS			5.3 S	REET ADDRES	s				
CITY-ST-ZIP			5.4 CI	IY-ST-ZIP					1
TITLE		☐ DELETE	61 TI	TLE .			Change	☐ Addition	
NAME			6.2 N	ME	-				
STREET ADDRESS			6.3 S	REET ADDRES	s				
OFFY-CI-ZIP			6.4 CI	TY-ST-ZIP	Т.			_ 1	ì

14. Unereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Rlock 13 if changed, or on an attaching the with an address.

SIGNATURE: ____

(941) 957-0030