## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

721659

DOCUMENT # SARASOTA INDEPENDENT EAGLES HOLDING COMPANY, INC

Principal Place of Business

Mailing Address

2926 WILKINSON RD

SAME

500001	841	466
05/28/96	-01055	011
李李李第1 2月		

SARASOTA, FL 34231			3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		N/A	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 Ct. 4 State	27	1		Fee Required
City & State	City & State		Election Campaign Financing	\$5.00 May Be
Zip Country	·	Country	Trust Fund Contribution	Added to Fees
24 25	29 30	Coantry	8. This corporation has liability for int Florida Statutes	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
81 Name NUEW G HODELS				
JIM CURTIS  82 Street Address (P.O. Box Number is Not Acceptable)				
5107 LAHAII	A DRIVE	290	6 WAKINSON	RIAD
		83		
· SARASOTA, FL	34232	84 City <b>S</b>	B. 4 =	85 Zin Code
			ASOTA	FL 34231
11. Pursuant to the provisions of Sections 617.0502 or registered agent, or both, in the State of Florid familiar with and accept the obligations of Sect	and 617.1508, Florida Statutes, the da. Such change was authorized by t	above-named corporation above-named corporation above-	on submits this statement for the purpo indirectors. Thereby accept the apploir	ose of changing its registered office
familiar with, and accept the obligations of Sect	on 617.0503, Florida Statutes.	111/2	4 // ani	05-11
SIGNATURE Signature, Spect or printed name of registered agent	ACVO and the if applicacie (NOTE Regis)	Lod Agent signature required with	/ Tures	05-14-96
12. OFFICERS AN		13.	ADDITIONS CHANGES TO OFFICE	FBS AND DIRECTORS IN 12
TITLE P JIM CURTIS		I TITLE ALL	1 mar of the contract of	Change  Addition
NAME 5107 LAHAINA		1.2 NAME	46 MALEC CIE	* B
STREET ADDRESS		13 STREET ADDRESS		_
CITY-ST-ZIP SARASOTA, FL	34232	14 CITY-ST-ZIP	RASOTA FL 3	4133
TITLE V D acres 5/4	DÉLETE 2	1 TITLE	ANFS PRUITT	Change
NAME ROBERT 5 LAG	433E, SR 2	2 NAME	15 SUMMER W	bod ct
STREET ADDRESS 3637 HALENE		3 STREET ADDRESS		
CITY-ST-ZIP SHEASOTH PL	TEL DEL EXE	4 CHTY-ST-ZIP	ARASOYN FL.	34233
D NICK NICKER	<i>30,</i> 10, 15		UDY HARRIS	Change Addition
NAME 2/21 WOOD ST		32 NAME	846 MALECC	מני
CITY-ST-ZIP SACASOVA FL.	2/1/つタケフ	AS STREET ADDRESS	HEASOYN FL	34233
	1-6	11 TITLE		Observa Districts
NAME TWAYNE RILEY	• • • • • • • • • • • • • • • • • • • •	L2 NAME	POLE DILLMA	~
STREET ADDRESS 5602 NEW YOR	<b>:</b> /2	1.3 STREET ADDRESS.	428 BURBANK	AVE
CITY-ST-ZIP SARBOTA FI	\$4233 h	I.4 CITY - ST - ZIP	ARASOTA FL	3 423/
THE STAMES PRUIT		i.1 TITLE	Dunk Dulland	Change Addition
MAINE	WOODET	12 NAME	TINK DILLMAN	h no -
		3 STREET ADDRESS	128 BURBANK	
CITY-ST-ZIP SARASOYA F		4 CITY-ST-ZIP	ARASOTA FL	34231
NAME DELTY PRUITS	- DIDELETE 6	STATE DETA	FANNIE NEULNI	Change 🔲 Addition
WILL SILMANEN	めると	2 NAME	15 MINE 11.5	<del>-</del>
	ー e//つきなー L <sup>®</sup>	3 STREET ADDRESS	an notes	21/55/
<ol> <li>I do hereby certify that the information supplied y</li> </ol>	vith this filing is voluntarily furnished a	and does not qualify for the	EANNIE DEVINO  16 ONIVE AUE  16 ONIVE AUE  16 exemption stated in Section 119 07  and that my signature shall have the se	(3)(k), Florida Statutes I further
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 617, Florida Statutes; and that my name				
appears in Block 12 or Block 13 if charges, or on an attachment with an address.				
SIGNATURE: HOLL HAND SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylor Promp & Co. Co.				