SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # 837531 (3)SARAJACK, INC. Mailing Adoress Principal Place of Business 231 MAIN ST 231 MAIN STREET C/O ROBERT B WOODMAN BIDDEFORD MA 04005 **BIDDEFORD MA 04005** 3a. Date of Last Report 3 Date Incorporated or Qualified 12/10/1976 05/01/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 01-0345576 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 8. This corporation has fiability for intangible tax under s. 199 032 Źιρ Country $Z_{(D)}$ Yes 🔲 No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BLALOCK, ROBERT G 802-11TH STREET WEST Street Address (P.O. Box Number is Not Acceptable) 82 83 **BRADENTON FL 34205** City 85 Zip Code 84 11. Pursuant to the provisions of Sections 607.0502 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. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE (NOTE forgettered Agent signature required when reliastating) Signature, typical or pointed non-notine parenet alguest and the it applies to in-(36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE CTD TITLE ROBERTS, DONALD H 1.2 NAME CR2E034 NAME 7150 N. TAMIAMI TRAIL 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 City - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 THLE SD TITLE ROGERS, PATRICIA L 2.2 NAME NAME 7150 N. TAMIAMI TRAIL 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 2 4 CITY - ST - 71P CITY-ST-ZIP Change Addition Pΰ DELETE 3.1 TITLE 5 TITLE ROBERTS, DONALD II 3.2 NAME NAME 7150 N. TAMIAMI TRAIL 3.3 STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-7IP 34 City-ST-ZIP Change Addition DELETE 4.1 DILE TITLE ROBERTS, JOHN L 4.2 NAME NAME 7150 N. TAMIAMI TRAIL STREET ADDRESS 4 3 STREET ADDRESS SARASOTA FL 4 4 CITY - ST - ZIP CITY-ST-ZIP DÉLÉTE Change AS 5.1 HILE HOPPER, MARY 5.2 NAME NAME 7150 N. TAMIAMI TRAIL STREET ADDRESS 5.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 5.4 CITY - \$1 - 7-P Change Addition DELETE 61 THEE TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - \$1 - 21P CITY-ST-7IP 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 inclicated 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 changed or on an attachment with an address.

JUNE 20,1896 941-355-2781