


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

APPROVED
AND
FILED

97 SEP 17 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *F 56 767*

1. Corporation Name
LONGWOOD PROPERTIES OF SARASOTA, INC.

- Amended -

Principal Place of Business 2033 Main St. Suite 104 Sarasota, FL 34237 US	Mailing Address 2033 Main St. Suite 104 Sarasota, FL 34237 US
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21 2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/02/1961	3a. Date of Last Report 02/03/1997
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-2150534	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	29 Country	6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Venable, Joseph P 1400 4th Ave. W. Bradenton, FL 34205	81 Name
	82 Street Address (P. O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	100002298201 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rivolta, Piero	1.2 NAME	-03/19/97--01038--003
STREET ADDRESS	215 Robin Dr.	1.3 STREET ADDRESS	*****61.25 *****61.25
CITY-ST-ZIP	Sarasota, FL 34236	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Renzo Rivolta	2.2 NAME	
STREET ADDRESS	215 Robin Dr.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Sarasota, FL 34236	2.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dorman, Terry B.	3.2 NAME	Grossman, Marvin J.
STREET ADDRESS	2033 Main St. #104	3.3 STREET ADDRESS	4580 Ascot Circle S.
CITY-ST-ZIP	Sarasota, FL 34237	3.4 CITY-ST-ZIP	Sarasota, FL 34235
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Venable, Joseph P.	4.2 NAME	
STREET ADDRESS	1532 84 St. NW	4.3 STREET ADDRESS	
CITY-ST-ZIP	Bradenton, FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify 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 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: *R. Rivolta* Date: **9-15-97** Daytime Phone #: **941-954-0355**

CR2E034 (9/96)