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 # F59900

(3)

CHRISTOPHER, SMITH, GENTILE, LEONARD & BRISTOW,

LEONARD, EDWARD J.

7819 18TH AVE. N.W.

5104 3RD AVE DR NW

STANELL, ROBERT E

BRADENTON FL

BRISTOW, LISA K

BRADENTON FL

FILED Apr 13 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address											i sabiiad libi aiire ikiid lälii aa	111 3011 5	Marie Andres e	,,,,,	13 87817	01811 1881	
1001 3RD AVE. W. Bradenton FL 34205					1001 3RD AVE. W. BRADENTON FL 34205												
										- !	DO NOT WRITE IN THIS SPACE						
										 	3. Date Incorporated or Qualit						\neg
											12/28/1981						- 1
2. Principal Place of Business					2a. Mailing Address					4. FEI Number			Applied Fo			olied For	コ
สไ				20	26					59-2142260				Not Applicable			le
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5, Certificate of Status Desired \$8.75 Addi					dditlonai		
<u></u>					27					S. Certificate of Status Desired				Fee Required			
City & State					City & State					ľ	6. Election Campaign Financia	ng				May Be	
23		,		20	В			_			Trust Fund Contribution		<u> </u>	Ac	ided to	Fees	_
— ^{Zip}		—	Country		-,	Zip	⊢ -,	untry	•	1	8. This corporation owes or ha	•	_	- 1			i
<u> </u>					29 30						Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent						
9. Name and Address of Current Registered Agent									Name		10. Name and Address of Ne	v Kegi	Stered A	gent			{
	IRISTOPHE							81	Marne								1
1001 THIRD AVE WEST SUITE 700										Addres:	ess (P.O. Box Number is Not Acceptable)						
BR	ADENTON	FL 34	1205					83									-4
								83									- 1
								84	City				P= 1	85	Zip C	ode	ᅱ
						- <u>-</u>		نا					FL	11			4
11. Pursuant office or i agent. I s	to the provis registered ag am familiar wi	iions c jent, c ith, an	of Sections 60 or both, in the od accept the	07.0502 and State of Fk obligations	d 6 oric s of	07.1508, Florida Statut da. Such change was i f, Section 607.0505, Fli	es, the a authorize orida Sta	above ed by stutes	e-named the corp 3.	corpora poration	ation submits this statement for 's board of directors. I hereby a	the pur	pose of the appo	chang intme	ing its nt as r	registere egistered	3
SIGNATURE	Stonet se broad	lor roni	ed name of regist	ered agent and	title	i angleable (NOT	F: Register	ad Ane	ent sinnelure	required s	vhen reinstating)		DATE				-
12.	Oignate 5. typeo	- C p p - m 1		S AND DIF			13.	,		qaco	ADDITIONS/CHANGES TO C	FFICE		DIRE	CTOR	S IN 12	┨
TITLE	VD					DELETE	_	ITLE		VD				Ch		Additi	'n
NAME	SMITH,	RICH	ARD D.				1.21	IAME								•	- 1
STREET ADDRESS	4915 18						1.3 9	TREET	ADDRESS	49	net K. Wells 39-79 Ave. Dr. E	Ξ.					
C/TY-ST-ZIP	BRADEN	ITON	, FL 00000				1.40	ITY-S	T-ZIP		asota, FL						- 1
TITLE	PD					☐ DELETE	2.1 1	ITLE						Ch	ange	Additi	in]
NAME	CHRIST	OPHI	R, ROBER	T E			2.21	AME				,					
STREET ADDRESS	3932 Rf	VERV	IEW BLVD I	W			2.3 8	TREET	ADDRESS								
CITY-ST-ZIP			, FL 00000				2.4	CITY-S	ST-ZIP								J
TITLE	VTD					DELETE	3.1 1	ITLE						Ch	ange	Additi	M)
NAME	GENTIL	E, JA	MES D				3.21	IAME									
STREET ADDRESS	2902 OI	LD OI	RCHARD LA	INE.			3.3 5	TREET	ADDRESS							•	
CITY-ST-ZIP	PARRISI	H FL					3.4.1	CITY-5	ST-ZIP								

4472 STAGHORN LN STREET ADDRESS 6.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 or an attachment with an address.

4.1 TITLE

4. 2 NAME

5.1 TITLE

6.1 TITL€

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST- ZIP

DELETE

DELETE

DELETE

SIGNATURE:

TITLE

KAME

NAME STREET ADDRESS

TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

EDWARD LEONARD

Change

Change

Addition

Addition

☐ Change ☐ Addition