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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G92950** (6)

1. Corporation Name

**SECRETARIAL SERVICES OF SARASOTA, INC.**



Principal Place of Business

**240 N. WASHINGTON BLVD. #306  
SARASOTA FL 34236**

Mailing Address

**240 N. WASHINGTON BLVD. #306  
SARASOTA FL 34236**

3. Date Incorporated or Qualified

**03/26/1984**

3a. Date of Last Report

**04/18/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DEWALD, LINDA J.  
2881 BAY STREET  
SARASOTA FL 34237**

81

Name

**Linda J. Dewald**

82

Street Address (P.O. Box Number is Not Acceptable)

**2639 Leafy Lane**

83

84

City

**Sarasota**

FL

85 Zip Code

**34239**

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

**Linda J. Dewald**

Signature, typed or printed name of registered agent and title if applicable.

**Linda J. Dewald**

(NOTE: Registered Agent signature required when reinstating)

**4-18-96**

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DPT  
DEWALD, LINDA J**  
STREET ADDRESS **2630 LEAFY LANE**  
CITY - ST - ZIP **SARASOTA FL**

TITLE ☐ DELETE

NAME **DVS  
BAKER, MARY E**  
STREET ADDRESS **5203 VENTURE AVE**  
CITY - ST - ZIP **SARASOTA FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**2639 Leafy Lane 34239**

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**5203 Ventura Ave. 34235**

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**Linda J. Dewald**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**941-366-0036**

Daytime Phone

CR2E034 (12/95)