FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996 H91105 DOCUMENT #
1. Corporation Name

DE MANIO & YOUNG, P.A.

Dispersed Dispersed Disperse	



Principal Place	of Business	Mailing Address	Mailing Address				
% PETER M. DE MANIO 2901 S. TAMIAMI TRAIL SARASOTA FL 34239		_	% PETER M. DE MANIO 2901 S. TAMIAMI TRAIL SARASOTA FL 34239		Date Incorporated or Qualified	3a. Date of La	st Report
					12/30/1985	03/13/	
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number 59-2616928	·i	Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc	real conservation with a contract comment comment contract and a contract c		\$8.75 Additional		
22		27	7		5. Certificate of Status Desired	7 -	ee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
Zipi 24	Country 25	Zip	Country 30	,	This corporation has lability for intangible tax under s 199.032, Florida Statutes		
24	9. Name and Address of Currer		1301		10. Name and Address of New Ro		
			81	Name			
	io, peter M. Tamiami trail		82	Street Add	iress (P.O. Box Number is Not Acceptabl	e)	
	TA FL 34239		83				
• • • • • • • • • • • • • • • • • • • •			84	City		FL 85	Zip Code
or registere familiar with	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da Such change was authoriz ion 607.0505, Florida Statutes	sed by the corp	L named corpo loration's boa	oration submits this statement for the purp ard of directors. I hereby accept the appo	ose of changing	its registered office ered agent. I am
SIGNATURE :	Signature, typed or printed name of registerial agent	acul hite it application (No	DTE Projetto od Ago	it signature require	ed when renstating	DA ³ L	
12.	OFFICERS AN	DURECTORS	13.		ADDITIONS/CHANGES TO OFFI	and a second of the second with a	···
TITLE	d p De Manio, Peter M.	☐ DELETE	1 1 TIT_E			☐ Cha	nge 🔲 Addition
NAME	2901 S. TAMIAMI TRAIL		1.2 NAME	1.0000000			
STREET ADDRESS	SARASOTA FL		1.3 STREE				
CITY-SI-ZIP TITLE	S	[] DELETE	1.4 CITY - 5 2.1 Till - 6	51-218		☐ Cha	nge 🗍 Addition
NAME	YOUNG, ROGER L.		2.2 NAME				
STREET ADDRESS	2901 S. TAMIAMI TRAIL		2.3 STREE	ADDRESS			
CITY-ST-ZIF	SARASOTA FL		2.4 CITY - 5	S1 - ZIP			ŀ
TITLE		DELETE	3 1 11/16			☐ Cha	nge 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STEEL	1 ADDRESS			
CITY-ST-ZIP			3.4 C(TY-5	St - 21F			
TIFLE		☐ DELFTE	4 1 TITLE			☐ Cha	nge 🗌 Addition
NAME			4.2 NAME				
STREET ADDRESS			4 3 S ! R & E	1			
CITY-ST-ZIF		C DELETE	4.4 CITy - 5	S1 - 20F	>>	☐ Cna	nge
TITLE		☐ DELETE	5 TILE	1		П сия	inge [] wadition
NAME BIOSEL ADDRESS			5.2 NAME	Appeces			
STREET ADDRESS .			5.3 STHEE				
CITY-ST-ZIP TITLE		DELETE	5 4 City - 5 6 1 Title	51 · Z0F		☐ Cha	nge Addition
NAME			6.2 NAME				. э. 🗀 жалын
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP	v certify that the information supplied	with this filing is voluntarily furn	e 4 €1TY-5 nished and doe		for the exemption stated in Section 119.	07(3)(k). Florida S	tatutes I furtner

certify that the information indicated on this annual report or suppliemental and does not quality for the exemption stated in Section 119.0/(5)(k), Florida Statutes I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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.

TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-366-1980 Daytmin Priorie