Applied For

Fee Required \$5.00 May Be

Added to Fees

Yes

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT

1999



9. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

SAWYER, DANFORD L.,JR.

SIGNATURE:

1. Corporation Name AREA GUIDES, INC.		
Principal Place of Business	Mailing Address	
2065 CANTU COURT	2065 CANTU COURT	
SARASOTA FL 34232	SARASOTA FL 34232	DO NOT WR
		 Date Incorporated or Qualifed 10/09/1987
2. Principal Place of Business	2a. Mailing Address	4. FEI Number
21	26	65-0014993
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired
City & State	City & State	6. Election Campaign Financing
23		Trust Fund Contribution
Zip Country	Zip Country 29 30	This corporation owes the cur Personal Property Tax.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90226 036 ***150.00



DO NOT WRITE IN THIS SPACE Incorporated or Qualifed

corporation owes the current year Intangible

10. Name and Address of New Registered Agent

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

2065 CANTU COURT			82	82 Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 34232				1					
			84	'		FL	85	Zip C	
office or re	to the provisions of Sections 607.0502 and 607.150 egistered agent, or both, in the State of Florida. Suc m familiar with, and accept the obligations of, Section	ch change was au	ithorized by	the cor	d corporation submits this statement for the purporporation's board of directors. I hereby accept the	se of o	changi itment	ng its r as regi	egistered stered
SIGNATURE					N. C.	TÉ			
	Signature, typed or printed name of registered agent and title if applica-		-	ent signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICEI		D DIR	ECTOE	2S IN 12
12.	OFFICERS AND DIRECTOR	S DELETE	13.		ADDITIONS/CHANGES TO OFFICE	13 AIN	☐ Ch		Addition
TITLE	DPT	DELETE	1.1 TITLE					ungo	
NAME	SAWYER, DANFORD L.		1.2 NAME						
STREET ADDRESS	2065 CANTU CT		13 STREE	T ADDRES	s				
CITY-ST-ZIP	SARASOTA FL		14 CITY-5	ST-ZIP					
TITLE	DV	☐ DELETE	2.1 TITLE				☐ Ch	ange	☐ Addition
NAME	HARTLY, MICHAEL		2.2 NAME						
STREET ADDRESS	2065 CANTU CT		2.3 STREE	T ADDRES	s				
CITY-ST-ZIP	SARASOTA FL		2. 4 CITY-	ST-ZIP					
TITLE	DS	☐ DELETE	3.1 TITLE	о, <u>с</u>.			Ch	ange	☐ Addition
NAME	SAWYER, RUTHANNE		3.2 NAME						
	2065 CANTU CT			T ADDRES					
STREET ADDRESS					3				
CITY-ST-ZIP	SARASOTA FL	□ perere	3.4. CITY-	ST-ZIP			□ Ch	2000	Addition
TITLE		☐ DELETE	4.1 TITLE					ange	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRES	S				
CITY+ST-ZIP			4.4 CITY-5	ST-ZIP					
TITLE	- '''	□ DELETE	5.1 TITLE				☐ Ch	ange	Addition Addition
NAME			5.2 NAME						
STREET ADDRESS	}		5.3 STREE	ET ADORES	s				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TITLE		DELETE	6.1 TITLE				Ch	ange	Addition
NAME			6.2 NAME						
			6.3 STRFE	ET ADDRES	s				
STREET ADDRESS			6.4 CITY-						
CITY-ST-ZIP	certify that the information supplied with this fijing do	nes net suelifi: for			ed in Section 119 07/3)/i) Florida Statutes 1 furth	or cod	ify tha	t the in	formation
indicated officer or	pertify that the imprimation supplied with this filling or on this annual report or supplemental annual report director of the colporation or the regiver of trustee or Block 13 if changed, of on an attachment with ar	t is true and accur empowered to ex	rate and tha cecute this	at my sig report as	gnature shall have the same legal effect as if mad s required by Chapter 607, Florida Statutes; and	e unae	er oatn	: tnat i	aman

Name