

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

**FILED**

**May 13 1998 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**DOCUMENT # K12273 (4)**  
1. Corporation Name  
**ASSOCIATED INVESTORS OF SARASOTA, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**% SAMUEL S AIDLIN**  
**6012 31ST ST E.**  
**BRADENTON FL 34203**

3. Date Incorporated or Qualified  
**01/15/1988**

2. Principal Place of Business 2a. Mailing Address  
21 **1642 Baywoods Way** 26 **1642 Baywoods Way**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number Applied For  
**65-0057891** Not Applicable

22 City & State 27 City & State  
**SARASOTA, FL** **SARASOTA, FL**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 Zip 24 Country 25 Country 29 Zip 30 Country  
**34231** **SARASOTA** **SARASOTA** **34231** **SARASOTA**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**AIDLIN, SAMUEL S.**  
**6012 31ST ST E.**  
**BRADENTON FL 34203**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1642 BAYWOODS WAY**  
83  
84 City **SARASOTA** FL 85 Zip Code **34231**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE **4/30/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PST</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>DIRECTOR</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>AIDLIN, SAMUEL S.</b>	1.2 NAME	<b>STEPHEN H. AIDLIN</b>
STREET ADDRESS	<b>6012 31ST ST E.</b>	1.3 STREET ADDRESS	<b>1642 BAYWOODS WAY</b>
CITY-ST-ZIP	<b>BRADENTON FL</b>	1.4 CITY-ST-ZIP	<b>SARASOTA, FL 34231</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>AIDLIN, SAMUEL S.</b>	2.2 NAME	
STREET ADDRESS	<b>6012 31ST ST E.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BRADENTON FL</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 file 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 \_\_\_\_\_ DATE **4/30/98** **944 02496 CH**

CR2E034 (10/97)