## 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

•	PLACE	Mailing Address 2700 NOVUS PLACE SARASOTA FL 34237 US		DO NOT WRITE IN THI  3. Date Incorporated or Qualified	
				01/20/1988	
<del>-</del>	ace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		<b>65-003 1960 5.</b> Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	θ	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	rent Hegistered Agent	81 Name	10. Name and Address of New Registere	u Agent
HUIE, W. GRADY 2201 RINGLING BLVD. SUITE 104 SARASOTA FL 34237			83	dress (P.O. Box Number is Not Acceptable)	
			84 City	F	■ S5 Zip Code
SIGNATURE	Signature, typed or printed name of registered OFFICERS	agent and title if applicable (N AND DIRECTORS	OTF: Registered Agent signature requ	rporation submits this statement for the purpose ation's board of directors. I hereby accept the apured when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	STANEK, EUGENE A. 2700 NOVUS PLACE SARASOTA FL		1.2 NAME  1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	S	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME Street address	STANEK, MARY F. 2700 NOVUS PLACE		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP	· <u> </u>	
TITLE NAME		☐ DELETÉ	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		į
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DECETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		•	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	•	
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME STREET LIBROSCO			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-S1-ZiP		

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 on an attachment with an address.

much Stated - marie to Strate

4.11-00

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