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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 28 1996 8:00 am
Secretary of State

DOCUMENT # K25160 (8)

1. Corporation Name

GULF COAST MANAGEMENT OF SARASOTA, INC.



Principal Place of Business

2831 RINGLING BLVD.
STE. 218 F
SARASOTA FL 34237-5346

Mailing Address

2831 RINGLING BLVD.
STE. 218 F
SARASOTA FL 34237-5346

2. Principal Place of Business

2a. Mailing Address

21 26 5023 Ringwood Meadow

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State
28 Sarasota, FL. 34235

23 Zip Country

29 Zip Country

24 25 29 30 g. Name and Address of Current Registered Agent

AVERY, JOHN E
5023 RINGWOOD MEADOWS
SARASOTA FL 34235

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(Not for Registered Agent signature or presentation only)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME AVERY, JOHN E.
STREET ADDRESS 5023 RINGWOOD MEADOWS
CITY-ST-ZIP SARASOTA FL 34235

TITLE VPS ☐ DELETE

NAME COLLINS, MARCIA A
STREET ADDRESS 3714 FLORES AVE.
CITY-ST-ZIP SARASOTA FL 34239

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

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 21, 1996

Date

941-371-3494

Daytime Phone #

CR2E034 (12/95)