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

PROFIT CORPORATION ANNUAL REPORT

1997

2 Principal Place of Business

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K38628

(9)

POPLAR ENTERPRISES OF SARASOTA, INC.

Principal Place of Business	Mailing Address
C/O HUGH MCPHEETERS, JR. 1550 RINGLING BLVD. SARASOTA FL 34236-6749	C/O HUGH MCPHEETERS, JR. 1550 RINGLING BLVD. SARASOTA FL 34236-6749

2a Mailing Address

FILED Apr 16 1997 8:00am Secretary of State



3. Date Incorporated or Qualified

10/13/1988

4 FEL Number

3a. Date of Last Report 02/15/1996

21		26		65-0076153	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	77.77.7	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	θ	City & Stato		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	7ip 29	Country 30		□ No	
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Registere	d Agent	
MCPHEETERS, HUGH, JR. 1550 RINGLING BLVD. SARASOTA FL 34236			81 Name 82 Street Add			
SAN	ASUIA FL 34230		83			
			84 City	F	85 Zip Code	
office or r	egistered agent, or both, in the State in familiar with, and accept the oblig-	of Florida. Such change was ations of, Section 607.0505, F	authorized by the corpora forida Statules.	rporation submits this statement for the purpose alion's board of directors. I hereby accept the a	of changing its registered	
	Signature, typed or printed name of registered ago	rit and little if applicable. (NO DIDIRE CTORS	I E Registered Agent signature requ		UD DIDECTORS IN 10	
12.	DPS OFFICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AI	Change Addition	
NAME	BARRON, DANIEL R	D Meete	1.2 NAME		← pugugo ← ⊢ vogutou	
STREET ADDRESS	50 S LASALLE ST		1.3 STREET ADDRESS			
CATY-ST-ZIP	CHICAGO IL		1.4 CITY-ST-ZIP			
TITLE	1	DELETE	2.1 TITLE		Change Addition	
NAME	LEADINGHAM, JR, HARRY	<u></u>	22 NAME			
STREET ADDRESS	50 S LASALLE ST		2.3 STREET ADDRESS			
CITY-ST-ZIP	CHICAGO IL		2. 4 CITY- ST- ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
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			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-S1-ZIP			
TITLE		☐ DELETE	5.1 YITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - 7IP			
TITLE		☐ DELETE	61 THLE		☐ Change ☐ Addition	
NAME			6.2 NAME	•		
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-S1-ZIP			
14. I do hereb informatio I am an ol appears in	by certify that the information supplied n indicated on this annual report or s flicer or director of the corporation or n Block 12 or Block 13 if changed, or	if with this filing does not qual upplemental annual report is the receiver or trustee empor on an attachinent with an ad	ify for the exemption state frue and accurate and the wered to execute this repo dress.	od in Section 119.07(3)(i), Florida Statutes. I furlt at my signature shall have the same legal effect ort as required by Chapter 607, Florida Statutes;	or certify that the as if made under oath; that and that my name	