

2001 UNIFORM BUSINESS REPORT (UBR)

6

FILED
Jul 19, 2001 8:00 am
Secretary of State

06-26-2001 90003 019 ***150.00

DOCUMENT # **K53345**
 1. Entity Name: **SARASOTA AMUSEMENT ENT., INC. (LA)**

Principal Place of Business Mailing Address
5131 WAUCHULA ROAD **SAME**
MYAKKA CITY, FL 34251

2. Principal Place of Business 3. Mailing Address
5131 WAUCHULA ROAD **SAME**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
MYAKKA CITY, FL
 Zip Country Zip Country
34251 **MANATEE**

4. FEI Number **59-2937483** Applied For Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

76659

6. Name and Address of Current Registered Agent
ROBERT ROSIN
1900 MAIN STREET, SUITE 210
SARASOTA, FL 34230

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE *[Signature]* **President** DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	LESTER H COLEGROVE	
STREET ADDRESS	5131 WAUCHULA ROAD	
CITY-ST-ZIP	MYAKKA CITY, FL 34251	
TITLE	DIRECTOR	<input type="checkbox"/> Delete
NAME	ROBERT ROSIN	
STREET ADDRESS	1900 MAIN STREET, SUITE 210	
CITY-ST-ZIP	SARASOTA, FL 34230	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* **PRS**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)

Attachment
Doc# K 53345
TUE 59



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

June 27, 2001

SARASOTA AMUSEMENT ENTERPRISES, INC.
5131 WAUCHULA RD
MYAKKA CITY, FL 34251-6720 US

Subject: SARASOTA AMUSEMENT ENTERPRISES, INC.

Reference ~~K53345~~
Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/sg

ANNUAL REPORTS SECTION

7/9/01
SIGNED FORM
ENCLOSED