## 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

DOCUMENT # K58962

(7)

APARTMENTS BY THE SARA-SEA, INC.

FILED
May 19 1998 8:00am
Secretary of State

Principal Place of Business	Mailing Address	Gilman + Carrie		
3400 S. TAMIAMI TRAIL	3400 S. TAMIAMI TRAIL	Gilman + Ciocia 60S SARASOTA SARASOTA, F1.342	†     <b>G</b>	
SUITE 301	SUITE 301	C L. Claul	26 DO NOT WRITE IN TH	HIS SPACE
SARASOTA FL 34239	GRHASUIA PE 34238	JARASOTA P1.342	3. Date Incorporated or Qualified	TO OT FIOL
			01/18/1989	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		65-0175543	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Sarasta Ko	rida 28 City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Z(p)	Country	8. This corporation owes or has paid the	current year Intangible
34242 25 Sur	asola [29]	30	Personal Property Tax due June 30.	L Yes L No
	s of Current Registered Agent	81 Name	10. Name and Address of New Registe	
JÄENSCH, PETER J.	John Campbell	→ <u>"                                   </u>	John CAmpbell - 6,14	han & CiociA
- 3400 S. TAMIAMI TRAIL	Gilman & Ciocity	82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE 201 SABABOTA PL 34239	John Campocil Gilman & Ciocia GOS SARASOTA PI. 348 SARASOTA, FI. 348	83 /	26 6 1 + 0	
SALESO IN POSTESS	Capacota Fl. 348	136 6	OS SARASOTA QU	AY
-	3143125	64 City	pas ota 1	FL   85   Zig God 36
1. Pursuant to the provisions of Section	ons 607.0502 and 607.1508, Florida Statut-	es, the above-named corp	poration submits this statement for the nurse	no of changing its registeres
office or registered agent, or both,	in the State of Florida. Such change was a on the objections of Section 607,0505. Fix	authorized by the corporat	tion's board of directors. I hereby accept the	appointment as registered
IGNATURE OF	Well	orag Statutou	5/5	198
Signature, typed or punted name of	ICON) est agent and the Araphication (NOTI	L: Flegistered Agent signature requir	red when reinstating) DA	TE .
<del></del>	FIGURS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TLE DP	☐ DELETE	1.1 THTLE		Change Addition
ME SCHERBER, ERNA		1.2 NAME		
TREET ADDRESS 6796 SARASEA CIR	ICLE	1.3 STREET ADDRESS		
ty-st-zip <b>Sarasota FL</b> ,2	54242	1.4 CITY - ST - ZIP		
TLE	L DELETE	2.1 TITLE		L Change L Additio
		2.2 NAME		
AME				
TREET ADDRESS		2.3 STREET ADDRESS		
treet address ty-st-zip	T refere	2.4 CITY-ST-ZIP		Change Addition
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