## 2007 FOR PROFIT CORPORATION - ANNUAL REPORT

## DOCUMENT # L09044

1. Entity Name

KIMCO DEVELOPMENT OF MCINTOSH SARASOTA, INC.



FILED
May 01, 2007 08:00 A
Secretary of State

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Principal Plac			Mailing Address	3						
NEW HYDE P	RD SUITE 100 042-0020	KIMCO REALTTY CORI P.O. BOX 5020 NEW HYDE PARK, NY				<b>           </b>	11 91211 BIBII BIB	} <b>B</b> [B]  B B]  P		
2. Principal P	Place of Busin	ess - No P.O. Box #	3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02132007	Chg-P	CR2E0	34 (12/06)	
City & State			City & State			4. FEI Numb	_		<del> </del>	oplied For ot Applicable
Zip Country		Zip	Country		5. Certificate	of Status Desired		\$8.75 Add Fee Require		
6. Name and Address of Current Reg			Registered Agent			7. Name and	Address of New F	Registered A	gent	
CT CORPORATION SYSTEM					Name					
1200 S. PINE ISLAND ROAD PLANTATION, FL 33324					Street Address	(P.O. Box Numb	er is Not Acceptabl	e)	<u></u>	
					City			FL	Zip Cod	le
8. The above	named entity	y submits this statement for	the purpose of changing it	s registere	l ed office or regist	ered agent, or bo	th, in the State of Fi		J amiliar with,	and accept
the obligat	ions of registi	ered agent.								
SIGNATURE.		or printed name of registered agent a	nd title if applicable. (NO	TE: Registere	d Agent signature requir	red when rainstating)		DATE		<del></del> .
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Trust Fund Contrib					~ <del></del> <del>~</del>	5.00 May Be ided to Fees		-		
10.		OFFICERS AND I	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
TITLE	D		Delete	TITLE	1				Change	Addition
NAME COOPER, MILTON STREET ADDRESS 3333 NEW HYDE PARK RD. STE. 100				NAME STREET ADDRESS			11000000			
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	VP SCHINDLI 3333 NEW	E PARK, NY 11042	☐ Delete	CITY- TITLE NAMI STRE	-ST-ZIP		05/18/07~	750589 80069-0		
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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 10 or Block 11 if changed, or on an attachment with appaddress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/07

516 8699000

Daytime Phone #