

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 28 1996 8:00 am
Secretary of State

DOCUMENT # L13212

1. Corporation Name

LES DEL MAR, INC.

Principal Place of Business

% MARY E VAN WINKLE
5516 AVENIDA DEL MARE
SARASOTA FL 34242

Mailing Address

% MARY E VAN WINKLE
5516 AVENIDA DEL MARE
SARASOTA FL 34242

2. Principal Place of Business

2a. Mailing Address

21 2131 Siesta Dr.
Suite, Apt. #, etc.

26 2131 Siesta Dr.
Suite, Apt. #, etc.

22 City & State

27 City & State

23 SARASOTA, FL
Zip

28 FL. SARASOTA
Zip

24 34239

25 S.R.G.

29 34239

30 S.R.G.

9. Name and Address of Current Registered Agent

KIRSTEIN, LESTER K., JR.
5516 AVENIDA DEL MARE
SARASOTA FL 34242

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: Lester K. Kirstein Jr.

(Name of Registered Agent signatory is required when filing)

3/26/96

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: KIRSTEIN, LESTER K JR
STREET ADDRESS: 5516 AVENIDA DEL MARE
CITY-ST-ZIP: SARASOTA FL

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ DELETE
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STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ DELETE
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TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE: ☒ Change ☐ Addition
12 NAME:
13 STREET ADDRESS: 2131 Siesta Dr
14 CITY-ST-ZIP: SARASOTA, FL 34239

21 TITLE: ☐ Change ☐ Addition
22 NAME:
23 STREET ADDRESS:
24 CITY-ST-ZIP:

31 TITLE: ☐ Change ☐ Addition
32 NAME:
33 STREET ADDRESS:
34 CITY-ST-ZIP:

41 TITLE: ☐ Change ☐ Addition
42 NAME:
43 STREET ADDRESS:
44 CITY-ST-ZIP:

51 TITLE: ☐ Change ☐ Addition
52 NAME:
53 STREET ADDRESS:
54 CITY-ST-ZIP:

61 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: Lester K. Kirstein Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

326-96 941-455-6236
Daytime Phone

CR2E034 (12/95)