2008 FOR PROFIT CORPORATION

FILED Apr 28, 2008 8:00 am Secretary of State

	ANNUAL	`	Secretary of State					
1. Entity Nam	MENT # L68172 ROUP INC. OF SARASOTA				04-28-2008	_		
Principal Place of Business % STEVEN E BAKER 3301 WHITFIELD AVE. SARASOTA, FL 34243		Mailing Address % STEVEN E BAKER 3301 WHITFIELD AVE SARASOTA, FL 34243			9NO 1910 NOV 1800	IKBI BIBU BIBU BUBU	EIFN GIGH GIGH	196 1 (1) (197 1
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04242008	Chg-P	CR2E034	4 (12/06)	
City & State		City & State		1	4. FEI Number Applied For 65-0195576 Not Applicab			•
Zip	Country	Zip	Country	5. Certificate	of Status Desired		8.75 Add ee Required	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New	Registered Ag	jent	
BAKER, STEVEN, E 3301 WHITFIELD AVE. SARASOTA, FL 34243				ald D. Clu Gress (P.O. Bax Number 3 Entexpr Ete 120	IK ES r is Not Acceptal ISC CIV			
City				edenton		FL	Zip Code	စ် ၃
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE DO CALL CHEK Signature, typed or printed name of registered agent and title if applicable. Thore: Regis				required when reinstating)		4-94-	200	<u> </u>
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	\$5.00 May Be Added to Fees			-			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/	CHANGES TO O	FFICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC MILLS, WALTER G. 3301 WHITFIELD AVE. SARASOTA, FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAKER, STEVEN, E 3301 WHITFIELD AVE. SARASOTA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHARP, LEMUEL III 3301 WHITFIELD AVE SARASOTA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HENSEY, TIMOTHY D. 2806 SARASOTA GOLF CLUB B SARASOTA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			ļ	Change	Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY_ST_ZIP				Change	☐ Addition

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attactment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven E. Baker, Secretary 4/24/08 941-909-908