

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

DOCUMENT # M67904 (6)

1. Corporation Name

BLITMAN BUILDING CORPORATION OF FLORIDA, II

Principal Place of Business

1345 MAIN ST.
STE E
SARASOTA FL 34236
US

Mailing Address

1345 MAIN ST.
STE E
SARASOTA FL 34236
US



3. Date Incorporated or Qualified
02/09/1988

3a. Date of Last Report
04/10/1995

4. FEI Number
58-1800868

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 2311 Falcon Trace Lane
Suite, Apt. #, etc.

26 2311 Falcon Trace Lane
Suite, Apt. #, etc.

22 City & State
Nokomis FL

27 City & State
Nokomis FL

23 Zip Country
34275 USA

28 Zip Country
34275 USA

24 34275 25 USA

29 34275 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

L. JOHN LOUD
1345 MAIN ST.
SUITE E
SARASOTA FL 34236

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2311 Falcon Trace Lane

83

84 City
Nokomis

FL

85 Zip Code
34275

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME BLITMAN, HOWARD N.
STREET ADDRESS 222 GRACE CHURCH ST #201
CITY-ST-ZIP PT CHESTER NY ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DT
NAME CASULA, JOSEPH
STREET ADDRESS 222 GRACE CHURCH ST #201
CITY-ST-ZIP PT CHESTER NY ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE S
NAME KATZ, DOROTHY
STREET ADDRESS 222 GRACE CHURCH ST #201
CITY-ST-ZIP PT CHESTER NY ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VP
NAME LOUD, L. JOHN
STREET ADDRESS 1345 MAIN ST. STE E
CITY-ST-ZIP SARASOTA FL ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 2311 Falcon Trace Lane
4.4 CITY-ST-ZIP Nokomis, FL 34275

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-96

DATE

941-485-3113

DAYTIME PHONE #

CR2E034 (12/95)