FILE NOW: FILING FEE IS \$61.25

FILED Apr 29 1998 8:00am MONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)N17469 EXXON ANNUITANT CLUB OF SARASOTA-MANATEE COUNTIE s. Inc. Principal Place of Business Mailing Address C/O STANLEY M ROBERTSON. N 7187 DEL LAGO DRIVE C/O STANLEY M ROBERTSON. II 3. Date Incorporated or Qualified 7187 DEL LAGO DRIVE 10/21/1986 **SARASOTA FL 34238-4524 SARASOTA FL 34238-4524** 4. FEI Number Applied For <u>59-2190021</u> Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 凤 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes Yes M No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 Yes 24 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROBERTSON, STANLEY M., II 82 Street Address (P.O. Box Number is Not Acceptable) 7187 DEL LAGO DRIVE SARASOTA FL 34238 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change NALIF RETTER, FREDERICK J. 1.2 NAME 1652 VALLEY DR STREET ADDRESS 1.3 STREET ADDRESS VENICE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition WILLIAM, GARRY T NAME 22 NAME 5215 INVERNESS DRIVE STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY - ST - ZW 2.4 CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE FERGUSSON, JAMES A. NAME 3.2 NAME 4 WINDWARD TERR STREET ADDRESS 3.3 STREET ADORESS CAPE HAZE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE ٧D 4.1 TITLE GIFFORD, DOUGLAS NAME 4. 2 NAME 3333 26TH AVENUE EAST 4.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL** 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE Change NAME anderson, patricia M. 5.2 NAME

14. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(I), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

105 FIELDSTONE DR

QUINTON, JOSEPH J

4053 PINEHURST PARK

VENICE FL

DELETE

MORRIS, WILLIAM S., III

4812 GREY WOOD LANE

146,5412

Change

Addition

CRZEG37

EXXON ANNUITANT CLUB OF SARASOTA-MANATEE COUNTIES, INC.

ADDITIONAL DIRECTORS

COL 12	COL 13		
D CROWELL, LOIS A. 223 BIMINI DRIVE PALMETTO, FL. 34221			
D BOYER, IRENE M. 5209 PALM AIRE DRIVE SARASOTA, FL 34243	Delete	D BAISLEY, JANE 4708 OCEAN BLVD. SARASOTA, FL 34242	Addition
D MARINO, ELEANOR B. 4843 HAWKSHEAD PARK SARASOTA, FL 34241	☑ Delete	D GOREE, ROBERT C. 3431 WINDING OAKS DRIVE LONGBOAT KEY, FL 34228	Addition