


FILE NOW: FILING FEE IS \$61.25

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Jul 14 1997 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Morthan</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N43745** (1)

**SOUTHWEST FLORIDA BUSINESS GUILD, INC.**

Principal Place of Business **677 N. WASHINGTON BLVD** Mailing Address  
**2080 RINGLING BLVD. P.O. Box 49802**  
**SARASOTA FL 34237-7000** **SARASOTA, FL**  
**34237-7041** **34230-6802**



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>06/03/1991</b>	3a. Date of Last Report <b>02/01/1996</b>
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>65-0306940</b>	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
<b>HEINEMAN, JEFF</b> <b>9218 WOOD MEADOW LOOP</b> <b>BRADENTON FL 34202</b>	81. Name <b>Peter Horstman</b> 82. Street Address (P.O. Box Number is Not Acceptable) 83. <b>4051 Palau DR.</b> 84. City <b>Sarasota</b> FL 85. Zip Code <b>34241</b>

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]* DATE **2/21/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<del>President</del> <b>P/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HORSTMAN, PETER</b>	1.2 NAME	<b>HORSTMAN, Peter</b>
STREET ADDRESS	<b>2155 WOOD STREET APT B-8</b>	1.3 STREET ADDRESS	<b>4051 Palau DR.</b>
CITY-ST-ZIP	<b>SARASOTA FL 34237</b>	1.4 CITY-ST-ZIP	<b>Sarasota, Fla 34241</b>
TITLE	CD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<del>President</del> <b>V/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HEINMAN, JEFF</b>	2.2 NAME	<b>Shelly KENNEDY</b>
STREET ADDRESS	<b>9218 WOOD MEADOW LOOOP</b>	2.3 STREET ADDRESS	<b>5560 Bee Ridge Rd, Ste D1</b>
CITY-ST-ZIP	<b>BRADENTON FL 34202</b>	2.4 CITY-ST-ZIP	<b>Sarasota, Fla. 34233</b>
TITLE	TD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<del>Director</del> <b>T/D</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HERMANSON, SHIRLEY</b>	3.2 NAME	<b>TOM MCKENZIE</b>
STREET ADDRESS	<b>4763 MEREDITH LANE</b>	3.3 STREET ADDRESS	<b>1256 Old Stickney Pt. Rd.</b>
CITY-ST-ZIP	<b>SARASOTA FL 34241</b>	3.4 CITY-ST-ZIP	<b>Sarasota, Fla. 34242</b>
TITLE	PD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<del>President</del> <b>S/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BAUMBAUGH, BOOTS</b>	4.2 NAME	<b>Michael BRUNO</b>
STREET ADDRESS	<b>2572 PORTLAND STREET</b>	4.3 STREET ADDRESS	<b>9218 WOOD MEADOW LOOP</b>
CITY-ST-ZIP	<b>SARASOTA FL 34231</b>	4.4 CITY-ST-ZIP	<b>BRADENTON, Fla. 34202</b>
TITLE	SD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<del>Director</del> <b>S/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VANNATTA, STEVEN</b>	5.2 NAME	<b>Betty ASH</b>
STREET ADDRESS	<b>5445 18TH COURT WEST</b>	5.3 STREET ADDRESS	<b>1301 28th St. W</b>
CITY-ST-ZIP	<b>BRADENTON FL 34207</b>	5.4 CITY-ST-ZIP	<b>BRADENTON, FLA. 34205</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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.

CR2E037 (9/96)

7/6/97 TITLE CORRECTIONS