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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700003775 (0)

THE PENNYWISE COMMITTEE, INC.

FILED Jan 23 1998 8:00am Secretary of State

THE PERMITANSE COMMITTEE, INC.		1 (82 141 150 151 151 152 152 153 153 153 153 153 153 153 153 153 153 153	
Principal Place of Business	Mailing Address		T TOO THE STORE SOUTH SOUTH OR THE SOUTH OR THE SOUTH DOESN THAT I SOUTH INDIVIDUAL TO THE SOUTH INDIVIDUAL THE SOUTH INDIVIDUAL THE SOUTH INDIVIDUAL THE SOUTH INDIVIDUAL THE
C/O C. MICHAEL COLLINS 240 8 PINEAPPLE AVENUE 11TH FLOOR SARASOTA FL 34236	C/O C. MICHAEL COLLINS 240 S PINEAPPLE AVENUE : SARASOTA FL 34236	IITH FLOOR	3. Date Incorporated or Qualified 07/01/1997 4. FEI Number Applied For
			65-0770292 Not Applicable
2. Principal Place of Business	2a. Mailing Address	_	5. Certificate of Status Desired S8.75 Additional
21 C/O MACK Reid		ReiD	Fee Required
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22 3938 PIN CAKS ST	27 3928 P10 City & State	OAKSST	
23 SARASOTA FL	28 SARASOTA	FL	7. Is this nonprofit corporation a homeowners association?
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 34232 25 USA	2034232 3	ล <i>บ</i> .รค	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			
81 Name			
COLLINS, C. MICHAEL 240 S PINEAPPLE AVENUE 11TH FLOOR		82 Street Add	ress (P.O. Box Number is Not Acceptable)
SARASOTA FL 34236		63	
		84 City	85 Zip Code
11. Durament to the provisions of Partiese 617 0503 and 617 1509. Floride Nature, the above several assessment in the latest test for the several description.			
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 reinsteting) DATE			
12. OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE	Change Addition
NAME COLLINS, C. MICHAEL		1.2 NAME	
STREET ADDRESS 240 S PINEAPPLE AVENUE 111	TH FLOOR	1.3 STREET ADDRESS	
CITY-ST-ZIP SARASOTA FL 34236		1.4 CITY - ST - ZIP	
TITLE D	☐ DELETÉ	2.1 TITLE	☐ Change ☐ Addition
NAME JACOBS, DEBRA		2.2 NAME	
STREET ADDRESS 2700 N TAMIAMI TRAIL		2.3 STREET ADORESS	
CITY-ST-ZIP SARASOTA FL 34234	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Change Addition
NAME REID, MACK		3.2 NAME	C CHANGE T MOUNTING
STREET ADDRESS 3100 FRUITVILLE ROAD			928 PIN CAKS ST
CITY-ST-ZIP SARASOTA FL 34237		1	ARASOTA FL 24222
TITLE D	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME HENKEL, HUGH H	_	4. 2 NAME	
STREET ADDRESS 1615 PELICAN POINT DRIVE		4.3 STREET ADDRESS	
CITY-ST-ZIP SARASOTA FL 34231	•	4.4 DITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	Ì
STREET ADDRESS CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	I

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.

CIGNATURE.

m suchanta

1-12-94

011.777.3911