

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P18291 (5)
1. Corporation Name
SPINNAKER'S OF SARASOTA SQUARE, INC.

Principal Place of Business SARASOTA SQUARE MALL #A-31 8201 S. TAMIAHI TRAIL SARASOTA FL 34238 US	Mailing Address 5211 MARYLAND WAY STE 2020 BRENTWOOD TN 37027-5011 US
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3. Date Incorporated or Qualified 03/04/1988	3a. Date of Last Report 04/23/1996
4. FEI Number 65-0089336	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (DATE) _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURRAY, TERRY R.	12 NAME	
STREET ADDRESS	5211 MARYLAND WAY S-2020	13 STREET ADDRESS	
CITY-ST-ZIP	BRENTWOOD TN	14 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNSFORD, ROBERT W.	22 NAME	
STREET ADDRESS	5211 MARYLAND WAY S-2020	23 STREET ADDRESS	
CITY-ST-ZIP	BRENTWOOD TN	24 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIZZINI, SANDRA H.	32 NAME	
STREET ADDRESS	5211 MARYLAND WAY S-2020	33 STREET ADDRESS	
CITY-ST-ZIP	BRENTWOOD TN	34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Terry R. Murray, President 2/14/97 (615) 370-0081



June 12, 1998

Florida Department of State
Sandra B. Mortham
Secretary Of State
P. O. Box 6327
Tallahassee, FL 32314

RE: Spinnaker's of Sarasota Square, Inc.
Document #P18291

Enclosed please find a copy of our 1997 Corporate Annual Report. I am submitting this copy which has an original signature and have noted one corporate officer change. I did not receive a renewal form for this year and was told to file our 1998 report using a copy of our last years report with an original signature.

I have also enclosed a check in the amount of \$150.00 instead of the \$165.00 I submitted last year. After calling your office I was told that there had been a change in the cost of the annual fee. I would also like to request waiver of the late fee since I did not receive a renewal notice.

Thank you for your help.

Sincerely,

A handwritten signature in cursive script that reads "Audine S. Mitchell".

Audine S. Mitchell
Controller