## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

HELMS, R B

5300 OCEAN BLVD #1102

SARASOTA FL 34242

P92000002234 (2) **DOCUMENT #** 

DM OF SARASOTA, INC. Mailing Address Principal Place of Business 5300 OCEAN BLVD #1102 5300 OCEAN BLVD #1102 SARASOTA FL 34242 SARASOTA FL 34242 3. Date Incorporated or Qualified 3a. Date of Last Report 11/02/1992 05/01/1995 4. FEI Number 2a. Mairing Address 2. Principal Place of Business 65-0428155 21 26 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired 22 6. Election Campaign Financing City & State City & State Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032,  $Z_{1D}$ Ζφ ☐ Yes ☐ No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81

Zip Code 84 City 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 co-poration's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

| SIGNATURE _     | Signature its people in prome them a softrespect-west aspect with the of said. | on a Na St F Fo | gatered Agrant signature negara | diwher national DATE   |
|-----------------|--|-----------------|---------------------------------|--|
| 12.             | OFFICERS AND DIRECTO   | AS              | 13.                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12              |
| 11ILE           | P  | DELETE.         | 1.1005                          | Change Addition  |
| NAME            | HELMS, R B   |                 | 1.2 NAME                        |  |
| STREET ADDRESS  | 5300 OCEAN BLVD. #1102   |                 | 1.3 STRIET ADDRESS              |  |
| CITY-ST-ZIP     | SARASOTA FL 34242-3323   |                 | 1.4 CITY - \$1 - Z/2            |  |
| TITLE           |  | DELETE          | 2 1 TITLE                       | ☐ Change ☐ Addition  |
| NAME            |  |                 | 2.2 NAME                        |  |
| STREET ADDRESS  |  |                 | 2.3 STR-ET ADOPESS              |  |
| CITY - ST - ZIP |  |                 | 2.4 CiTN - ST - Zif             |  |
| TITLE           |  | DELETE          | 3 1 TULE                        | Change Addition  |
| NAME            |  |                 | 3.2 NAME                        |  |
| STREET ADDRESS  |  |                 | 3.3 STEFFT ADDRESS              |  |
| CITY-ST-ZIP     |  |                 | 3.4 CIT** - ST - ZIP            |  |
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| TITLE           |  | DELETE          | 5 1 TiT E                       | ☐ Change ☐ Addition  |
| NAME            |  |                 | 5 2 NAMÉ                        |  |
| STREET ADDRESS  |  |                 | 5.3 STREET ADDRESS              |  |
| CITY-ST-ZIP     |  |                 | 5.4 CITY - ST - ZIF             | - Aller  |
| TITLE           |  | ☐ DELETE        | 6 1 1 TEF                       | Change Addition  |
| NAME            |  |                 | 6.2 NAME                        |  |
| STREET ADDRESS  |  |                 | 63 STEEL ADDRESS                |  |
| CITY - ST - ZIP |  |                 | 6 4 CIT √ - ST - ZIP            |  |
|                 | 1  |                 | 1                               | College Hard State College 110 07/2/ld Floods Statutes Unidher |

supplied with this filing is voluntarily furnished and loos not qualify for the exemption stated in Section 119.07(3)(k). Honda Statutes, if under notice special reports of the same logal effect as if made under the top-foration of the receiver or trustion empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name 14. I do hereby certify that the information su certify that the information II) are the formation that the information III are the formation that the formation of the appears in Block 12 or Book 13 figurance.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

april 25, 1996

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable