

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 APR 29 PM 3:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000003237 (3)**

1. Corporation Name

**SWIFT/TUTTLE CORP.**



Principal Place of Business

Mailing Address

**5750 SWIFT RD.  
SARASOTA FL 34231**

**5750 SWIFT RD.  
SARASOTA FL 34231-6214**

3. Date Incorporated or Qualified

**01/14/1993**

3a. Date of Last Report

**05/01/1996**

2. Principal Place of Business

2a. Mailing Address

21

26

**P.O. Box 22109**

4. FEI Number

**65-0380505**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

23

28

City & State  
**Sarasota, Florida**

24

29

Zip  
**34276-5109**

30

Country  
**USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TISHMAN, MARK L  
5750 SWIFT ROAD  
SARASOTA FL 34231**

81 Name

82 Street Address (P.O. Box Number is optional)

83

84 City

**FL**

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**DVS  
TISHMAN, MARK L.  
5750 SWIFT ROAD  
SARASOTA FL**

1.1 TITLE

**DPT**

☒ Change

☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

1.2 NAME

**Tishman, Mark L.**

1.3 STREET ADDRESS

**5750 Swift Road**

1.4 CITY - ST - ZIP

**Sarasota, FL 34231-6214**

TITLE ☐ DELETE

**DPT  
MARTIN, RICHARD P.**

STREET ADDRESS

CITY - ST - ZIP

2.1 TITLE

**DVS**

☒ Change

☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

2.2 NAME

**Martin, Richard P.**

2.3 STREET ADDRESS

**5750 Swift Road**

2.4 CITY - ST - ZIP

**Sarasota, FL 34231-6214**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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 for on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Mark L. Tishman**

**4/28/97**

**941/923-2000**

Date

Daytime Phone #

CR2E034 (9/96)