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Apr 23 1997 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 # P93000015206 (4)

1. Corporation Name

MIRA LAGO DEVELOPMENT, INC.



Principal Place of Business 7184 BENEVA ROAD SARASOTA FL	Mailing Address 7184 BENEVA ROAD SARASOTA FL 34238-2804
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3. Date Incorporated or Qualified 03/01/1993	3a. Date of Last Report 04/29/1996
4. FEI Number 65-0404444	Applied For <input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent	
WILLIAM B. HAGER 7184 BENEVA RD 8TH FLOOR SARASOTA FL 32438	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
FL	

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	NAME	1.1 TITLE	D/P
NAME	STORY, STEPHEN F	1.2 NAME	HUGH F. CULVERHOUSE JR.
STREET ADDRESS	7184 BENEVA RD.	1.3 STREET ADDRESS	SUITE 3599, ONE BISCAYNE TOWER
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	MIAMI, FL 33131
TITLE	VS	2.1 TITLE	D
NAME	HAGER, WILLIAM B	2.2 NAME	ANDREW N. CAPPELLO
STREET ADDRESS	7184 BENEVA RD	2.3 STREET ADDRESS	1408 N. WESTSHORE BLVD. SUITE 908
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	TAMPA, FL 33623
TITLE	T	3.1 TITLE	D
NAME	KNIGHT, MARK T	3.2 NAME	TOM PURCELL
STREET ADDRESS	7184 BENEVA RD	3.3 STREET ADDRESS	4240 LAKESIDE DR.
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32210
TITLE		4.1 TITLE	V/AS
NAME		4.2 NAME	JAMES A. PAULMANN
STREET ADDRESS		4.3 STREET ADDRESS	7184 BENEVA ROAD
CITY-ST-ZIP		4.4 CITY-ST-ZIP	SARASOTA, FL 34238
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____ MARK T. KNIGHT 4/17/97 941-921-7953

CR2E034 (9/96)