FILE NOW. FILING FEE AFTER WAY 151 15 \$550.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State

 1998

FILED May 06 1998 8:00am

	1998	DIVISION OF C	URPURATIONS	Canatam	er of State	
DOCUMENT # P93000026399				Secretary of State		
Savannah of Sarasota, Inc.						
Principal Plac	e of Business	Mailing Address	·	1100 (25) \$130\$***		
1741 MAIN S		1741 MAIN STREET				
SARASOTA F		SARASOTA FL 34236				
US		US		DO NOT WRITE IN	N THIS SPACE	
				3. Date Incorporated or Qualified 4/12/93		
2. Principal P	lace of Business I Main Street	2a. Mailing Address	Street	4. FEI Number 65 - 0421441	Applied For Not Applicable	
Suite, Apt.	W, etc.	Suite, Apt. #, etc.	<u> </u>		- \$9.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat 23 Sala	sota Fla	City & State Sara Sota	Fla	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip D. (1.2.2.)	an Country A	8. This corporation owes or has paid	the current year Intangible	
zip 342	13C 25 USA		30 OSA	Personal Property Tax due June 30		
	Name and Address of Current	Registered Agent		10. Name and Address of New Regis	stered Agent	
	0		81 Name			
Omer Causas, Esquire 82 Street Addr. 83			ress (P.O. Box Number is Not Acceptable) _		
2070	Kingling 12	ralevand	83	· · · · · · · · · · · · · · · · · · ·		
Sara	sota, Florida	34237	84 City		FL 85 Zip Code	
Office of f	'égistered agent, or both, in the Slate o	il Florida. Such change was ai	ulharized by the corporat	poration submits this statement for the pur- tion's board of directors. Thereby accept t	pose of changing its registered the appointment as registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Slightly ryped is printed numbers regulated separational	ind trus a looking the trust that	Registered Agent signature reguir	ed when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12	
TITLE	PSTD .	☐ DELETE	1.1 TITLE		Change Addition	
NAME	Worthington, C	orman	1.2 NAME			
STREET ADDRESS	1741 Main str	reet	1.3 STREET ADDRESS		· .	
CITY -ST - ZIP	Sava sofa Flo	1. 34236	1 # CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME		;	
STREET ADDRESS			2.3 STREET ADDRESS		į	
CITY-ST-ZIP			2. 4 GITY - ST - ZIP			
TITLE		OELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 J STREET ADDRESS			
CITY-ST-ZIP			34. CITY+ST+ZIP			
fifLE		☐ DELETE	4 1 TITLE		Change Addition i	
NAME			4. 2 NAME		ļ	
STREET ADDRESS			4 3 STREET ADDRESS			
CITY - ST - ZIP			4 4 CITY - ST - ZIP			
TIFLE		DELETE	S.I TITLE		Change Addition	
NAME			5.2 NAME		-15	
STREET ADDRESS			5.3 STREET ADDRESS		21.	
CITY -ST - ZIP			5.4 GITY - ST - ZIP		2.8	
FITLE		☐ DELETE	6.1 TITLE	200002514 -05/07/9801009-	GD Change Addition	
NAME			8.2 NAME	-05/07/9801009-	-014	
STREET ADDRESS			6.3 STREET ADDRESS	***150.00		
CITY - ST - ZIP			64 CHTY-ST-ZIP			
14. I hereby o	ertify that the information supplied with	this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I lur e shall have the same legal effect as if mi	ther certify that the information	
officer or i	director of the corporation of the received	armular report is frue and accu in or trustee empowered to a	rate and that my signatur recute this report as requ	e shall have the same legal effect as it mi lired by Chapter 607, Florida Statutes; and	d that my name appears in	

SIGNATURE: