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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000038330 (5) **DOCUMENT #**

EASY LIVING OF SARASOTA, INC. Principal Place of Business Mailing Address 3400 S. TAMIAMI TRAIL. 3400 S. TAMIAMI TRAIL SUITE 301 SUITE 301 SARASOTA FL 34239 SARASOTA FL 34239 3. Date Incorporated or Qualified 3a. Date of Last Report 05/24/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4 FELNumber Applied For 21 65-0419443 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name JAENSCH, PETER J 82 Street Address (P.O. Box Number is Not Acceptable) 3400 S. TAMIAMI TRAIL SUITE 301 83 SARASOTA FL 34239 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D DELETE TITLE 1. 1 TITLE Change ☐ Addition TAYLOR, BRIAN NAME 1.2 NAME 2221 JO-ANN DRIVE STREET ADDRESS 1.3 STREET ADORESS SARASOTA FL 34231 CITY - ST - ZIP 1.4 CITY - \$1 - 2IP TITLE DELETE 2 1 TITLE ☐ Change ☐ Addition TAYLOR, JEAN H NAME 22 NAME 2221 JO-ANN DRIVE STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP 2 4 CITY-ST-7IP THILE DELETE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS DITY-ST-ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 5 1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS

6.4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 anged, or on an attachment with an address

6.3 STREET ADORESS

CITY-SI-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

APRIL 6 1996 941 921 6212

CR2E034 (12/95)