FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **P94000004850 (1)**

1. Corporation Name
SARASOTA REC, INC.

Principal Place of Business
5254 OCEAN BLVD.
SARASOTA FL 34242
US

Mailing Address
5254 OCEAN BLVD.
SARASOTA FL 34242

3. Date Incorporated or Qualified: **01/03/1994**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 6553 SUPERIOR AVE.
Suite, Apt #, etc
27
City & State
28 SARASOTA FL
Zip 29 34231 Country 30 USA

4. FEI Number: **65-0461846** 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

9. Name and Address of Current Registered Agent
SYPRETT, JIM D
1900 RINGLING BLVD.
SARASOTA FL 34236

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 of a Corporate Officer or Director / Signature of a New Registered Agent DATE

12. OFFICERS AND DIRECTORS

TITLE	D ☐ DELETE
NAME	SYPTETT, TROY D
STREET ADDRESS	5254 OCEAN BLVD.
CITY-ST-ZIP	SARASOTA FL 34242
TITLE	D ☐ DELETE
NAME	BEYCHOK, DANIEL E
STREET ADDRESS	5254 OCEAN BLVD.
CITY-ST-ZIP	SARASOTA FL 34242
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	SYPRETT, TROY D. (SPELLING CORRECTION)
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	D ☐ Change ☒ Addition
3.2 NAME	MATTHES, RUSSELL A.
3.3 STREET ADDRESS	5254 OCEAN BLVD
3.4 CITY-ST-ZIP	SARASOTA, FL 34242
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 this 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 4/22/96 — Daytime Phone # (941)927-8807

CR2E034 (12/95)