

2000 UNIFORM BUSINESS REPORT (UBR)

01166

DOCUMENT # P94000074596

1. Entity Name
KIMCO SARASOTA 378, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR -7 PM 3:56

Principal Place of Business Mailing Address
KIMCO REALTY CORP. KIMCO REALTY CORP.
P.O. BOX 5020 P.O. BOX 5020
NEW HYDE PARK NY 11042-0020 NEW HYDE PARK NY 11042-0020



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number **65-0531169** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete KIMMEL, MARTIN S 3333 HYDE PARK ROAD NEW HYDE PARK NY 11042-0020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete COOPER, MILTON 3333 NEW HYDE PARK ROAD NEW HYDE PARK NY 11042-0020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete FLYNN, MIKE 3333 NEW HYDE PARK ROAD NEW HYDE PARK NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete PAPPAGALLO, MIKE 3333 HYDE PARK ROAD NEW HYDE PARK NY 11042-0020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete KAUDERER, BRUCE 3333 HYDE PARK ROAD NEW HYDE PARK NY 11042-0020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete WEISS, ALEX 3333 HYDE PARK ROAD NEW HYDE PARK NY 11042-0020

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400003144804--2 -02/23/00--01064--005 ***2476.25 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Mike Pappagallo* Date: *2/7/00* Day/Evening Phone #: *(916) 869-7238*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

CR2E034 (9/99)