

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2006 08:00 AM
Secretary of State



DOCUMENT # P94000074596

1. Entity Name
KIMCO SARASOTA 378, INC.

Principal Place of Business
**3333 NEW HYDE PARK RD
 SUITE 100
 NEW HYDE PARK NY 11042**

Mailing Address
**KIMCO REALTY CORP.
 P.O. BOX 5020
 NEW HYDE PARK NY 11042-0020**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/05)

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

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee Will Be \$550.00
 Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **V** Delete
 NAME **SCHINDLER, MICHAEL**
 STREET ADDRESS **3333 HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY 11042-0020**

TITLE Change Addition
 NAME **U00000502334**
 STREET ADDRESS **04/25/06-80101-001 150.00**
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **COOPER, MILTON**
 STREET ADDRESS **3333 NEW HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY 11042-0020**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** Delete
 NAME **FLYNN, MIKE**
 STREET ADDRESS **3333 NEW HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** Delete
 NAME **PAPPAGALLO, MIKE**
 STREET ADDRESS **3333 HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY 11042-0020**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** Delete
 NAME **KAUDERER, BRUCE**
 STREET ADDRESS **3333 HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY 11042-0020**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** Delete
 NAME **YARMAK, JOEL I**
 STREET ADDRESS **3333 HYDE PARK ROAD**
 CITY-ST-ZIP **NEW HYDE PARK NY 11042-0020**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]

3-17-06

516-869-9000