FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P95000008349 1. Corporation Name

FILED Mar 22, 1999 8:00 am Secretary of State 03-22-1999 90059 043 ***150.00

Principal Place of Business Mailing Address 2376 BURTON LANE SARASOTA FL 34239 8871 Flaharman Bay Litro Sarasota FL 34239 3. Date Incorporated or Qualifed	
2376 BURTON LANE SARASOTA FL 34239 8871 Flehermans Bay Drive Sarasota FL 34239 3. Date Incorporated or Qualifed	
SARASOTA FL 34239 8871 Fishermans Bay Drive Sarasota FL 34239 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
3. Date Incorporated or Qualifed	
3. Date Incorporated or Qualifed	
02/01/1995	
	pplied For
	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75	Additional
22 Fee R	Required
City & State City & State 5. Election Campaign Financing \$5.00) мау Ве
23 Trust Fund Contribution Added	to Fees
Zip Country Zip Country 8. This corporation owes the current year Intangible	
24 25 29 30 Personal Property Tax. Yes	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
81 Name	
GETZEN, JAMES W 82 Street Address (P.O. Box Number is Not Acceptable)	
2376 BURTON LANE 8871 Fishermens Bay Drive	
2376 BURTON LANE SARASOTA FL 34239 8871 Fishermens Bay Drive Sarasota, FL 34231-6655 Siraet Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 Street Address (P.O. Box Number is Not Acceptable)	
84 City 85 Zin	Code
FL 1	
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 it office or registered agent, or both, in the State of Plorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as nagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	s registered egistered
SIGNATURE Signature, typed or printed farme of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITE PST DELETE 1.1 TITLE	Addition
NAME JAMES W. GETZEN 12 NAME 8871 FISHERMENS Bay Drive	
STREET ADDRESS 2376 BURTON LANE 1.3 STREET ADDRESS SATASOTA, FL 34231-6655	
CITY-ST-ZIP SARASOTA FL 14 CITY-ST-ZIP	
[7] Programme	Addition
NAME MINTA GETZEN 22 NAME 8871 Fishermens Bay Drive	
NAME MINTA GETZEN STREET ADDRESS 2376 BURTON LANE 22 NAME STREET ADDRESS 23 STREET ADDRESS SAFASOTA, FL 34231-6655	
CITY-ST-ZIP SARASOTA FL 2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE Change	Addition
NAME 3.2 NAME	
Towns and the second se	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	Addition
NAME 4.2 NAME	
J. Charles	
Change	Addition
THE SOME	-
CONTENT ADDITION	
STREET ADDRESS!	
	Addition
CITY-\$T-ZIP	· I I MUUUIION
TITLE DELETE 6.1 TITLE Change	: LI Addition
TITLE DELETE 6.1 TITLE NAME OF A STREET ADDRESS OF A STREET ADDRESS OF A STREET ADDRESS	
TITLE DELETE 6.1 TITLE Change	3 □ Audi((01)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

941-919-1347 Daytime Phone #