SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** P95000072182 (5) C & C OF SARASOTA, INC. Principal Place of Business Mairing Address 4067 SAWYER COURT 4067 SAWYER COURT SARASOTA FL 34233 SARASOTA FL 34233 3. Date Incorporated or Qualified 3a. Date of Last Report 9/19/95 09/19/1995 2. Principal Place of Business 2a. Mailing Address Applied For 65 060 2404 21 26 Not Applicable Suite, Apt. #, etc Suite, Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country 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 81 Name WINDT, JACK WM. 2389 RINGLING BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 SARASOTA FL 34237 84 City 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, typed or (more) har le of registered agent and the it application (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 DELE Change Addition NAME COHEN, MARTIN P 1.2 NAME STREET ADDRESS 3549 TANGIER TERRACE 1.3 STREET ADDRESS CITY - ST - ZIP SARASOTA FL 34239 1.4 CITY - ST - 7IP TITLE DELETE STD 21 11[15 Change Add-tion NAME CHURCH, WADE 2.2 NAME STREET ADDRESS 2314 ARLINGTON STREET 2.3 STREET ADDRESS CITY - ST - ZIP SARASOTA FL 34239 2 4 CHY - ST-2IP TITLE DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1.10 LE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 C(TY - ST - 7)P TITLE DELETE 5 1 TITLE Change Addition NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST ZIP 5 4 CITY - ST - ZIP TITLE DELETE 6.1 HTLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STHEET ADDRESS CITY-ST-ZIP 64 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 1 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 directly the corporation or the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 13 and 15 the corporation of the lower processor in Rhot 15 and 15 the corporation of the lower processor in Rhot 15 and 15 the corporation of the lower processor in Rhot 15 the lowe address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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