

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000077322 (2)**

1. Corporation Name
MANASOTA BAYSIDE DEVELOPMENT CORPORATION



Principal Place of Business
**1819 MAIN STREET
SUITE 610
SARASOTA FL 34236**

Mailing Address
**1819 MAIN STREET
SUITE 610
SARASOTA FL 34236**

2. Principal Place of Business

21 **Same**
Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 **2355 North Beach Rd**
Suite, Apt. #, etc.

27

28 **Englewood FL**

29 Zip 30 Country

34223 USA

3. Date Incorporated or Qualified **10/09/1995** 3a. Date of Last Report

4. FEI Number **06-1334530** 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

**NORTON, SAM D ESQ.
1819 MAIN STREET
SUITE 610
SARASOTA FL 34236**

10. Name and Address of New Registered Agent

81 Name **N/A**

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 *Daniel Solaz*

4-3-96

12. OFFICERS AND DIRECTORS

TITLE	D President	<input type="checkbox"/> DELETE
NAME	SOLAZ, DANIEL C	
STREET ADDRESS	165 W. PUTNAM AVENUE	
CITY-ST-ZIP	GREENWICH CT 06830	
TITLE	D Vice President	<input type="checkbox"/> DELETE
NAME	BRIDGES, ROBERT E	
STREET ADDRESS	165 W. PUTNAM AVENUE	
CITY-ST-ZIP	GREENWICH CT 06830	
TITLE	Secretary	<input type="checkbox"/> DELETE
NAME	Bruce Berk	
STREET ADDRESS	290 Coconut Ave	
CITY-ST-ZIP	SARASOTA Florida 34236	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *Daniel Solaz* **DANIEL SOLAZ** Pres 203 661 3077

CR2E034 (12/95)