

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

FILED

Feb 27 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # **P96000004269 (2)**

1. Corporation Name

WEITZNER DEVELOPMENT CORPORATION

Principal Place of Business

**2071 MAIN STREET
SARASOTA FL 34237**

Mailing Address

**2071 MAIN STREET
SARASOTA FL 34237-6036**3. Date Incorporated or Qualified
01/12/19963a. Date of Last Report
N/A

2. Principal Place of Business

21 8482 S. Tamiami Trail

2a. Mailing Address

26 8482 S. Tamiami Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Sarasota, Florida

City & State

28 Sarasota, Florida

Zip

24 34238

Country

25 Sarasota

Zip

29 34238

Country

30 Sarasota

4. FEI Number

65-0640265

Applied For

Not Applicable5. 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

**WEITZNER & COMPANY, A PROFESSIONAL ASSOC.
2071 MAIN STREET
SARASOTA FL 34237**

10. Name and Address of New Registered Agent

81 Name Weitzner & Company, A Professional**82 Street Address (P.O. Box Number is Not Acceptable)
8482 S. Tamiami Trail****83****84****City Sarasota****FL****85 Zip Code 34238**

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

Arthur S. Weitzner, President**2/11/97**

Signature of or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WEITZNER, ARTHUR S	
STREET ADDRESS	1440 TAQUS AVENUE	
CITY - ST - ZIP	CORAL GABLES FL 33156	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WEITZNER, BRIGITTE	
STREET ADDRESS	1440 TAQUS AVENUE	
CITY - ST - ZIP	CORAL GABLES FL 33156	

TITLE		<input checked="" 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		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director/President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WEITZNER, ARTHUR S.	
1.3 STREET ADDRESS	8482 S. Tamiami Trail	
1.4 CITY - ST - ZIP	Sarasota, FL 34238	

2.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	WEITZNER, BRIGITTE	
2.3 STREET ADDRESS	8482 S. Tamiami Trail	
2.4 CITY - ST - ZIP	Sarasota, FL 34238	

3.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Kenneth W. Patton	
3.3 STREET ADDRESS	9210 63rd Avenue East	
3.4 CITY - ST - ZIP	Bradenton, FL 34202	

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 this 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:

Arthur S. Weitzner**2/11/97****(941)966-3807**

Date

Daytime Phone #

CR2E034 (9/96)