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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600065475 (1)

PATRICK J. GORMAN, P.A.

## FILED Apr 30 1998 8:00am Secretary of State

365-5110

21	STREET L 34236 lace of Business	Mailing Address 1800 SECOND STREET 803 SARASOTA FL 34236 US 2a. Mailing Address 26			DO NOT WRITE IN T  3. Date incorporated or Qualified  08/05/1996  4. FEI Number  65-0699477	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Zip Country		8. This corporation owes or has paid the		
24 25		29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		1 41	10. Name and Address of New Registe	red Agent
GORMAN, PATRICK J 1800 SECOND STREET 803 SARASOTA FL 34236			81 82 83	Name Street Add	iress (P.O. Box Number is Not Acceptable)	<b>85</b>   Zip Code
office or reagent. I a	egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was pations of, Section 607.0505, Fl	authorized by orida Statute IE Registered Ag	y the corpora s.		appointment as registered
12.	OFFICERS AP	ID DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	GORMAN, PATRICK J 1800 2ND ST,SUITE 803 SARASOTA FL	DELETE	1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE 2.2 NAME	ST-ZIP		Change Addition
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	2. 4 CITY - 3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS		. Change Addition
TITLE  NAME  STREET ADDRESS		☐ DELETE	3.4. CHY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADORESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-S	ADDRESS T-ZIP		Change Addition
14. I hereby of indicated officer or e	ertify that the information supplied von this annual report or supplement director of the corporation or the rec	with this filing does not qualify f all armual report is 170 and accepter or justee en powered to	or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I furthure shall have the same legal effect as if madured by Chapter 607, Florida Statutes; and t	er certify that the information le under oath; that I am an that my name appears in