4.23.97 B-5254 -C

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000076466 (7)

SOUTHERN APPRAISAL SERVICES, INC.

1847 NAUTILUS SARASOTA FL		1847 NAUTILUS DRIVE SARASOTA FL 34231-5425						
					3. Date Incorporated or Qualified 09/12/1996		of Last R	eport
21 1819	Maco of Business Main St.	2a. Mailing Address 26 1847 Naw	ilus	۸ .	4. FEI Number 65 - 069 8469			plied For t Applicable
Suite Apt.	176 402	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
23 SAC	åsota, FL.	City & State 28 Sarasota,	FL.		Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	
Zip 24 342	. Country	Zip	Country 30		8. This corporation has liability for Florida Statutes	intangible ta Yes		199.032
	9. Name and Address of Curren			10. Name and Address of New Re	egistered Ag	ent		
1847	OBEL, GERALD O 7 NAUTILUS DRIVE ASOTA FL 34231		82 83	Street Addi	ress (P.O. Box Number is Not Acceptal	ble)		
			84	City		FL	85 Zip (Code
agent. I a	registered agent, or both, in the State am familiar with, and accept the obligations of registered apr				tion's board of directors. I hereby accelling	DATE	niment as	registered
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	DERS AND D	IRECTOR	S IN 12
TITLE NAME STREET ADDRESS	KABOBEL, GERALD O 1847 NAUTILUS DRIVE	☐ DELE1E	1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS			Change	☐ Addition
CITY-ST-ZIP	SARASOTA FL 34231		1.4 CITY - S	T-ZIP				
TITLE		DELETE	2.1 TITLE				Change	Addition
NAME			2.2 NAME					
STREET ADDRESS	[2.3 \$1REE1	ADDRESS				
CITY-ST-ZIP			2.4 CITY-5	1-ZIP	·	·····		
TITLE		☐ DELETE	3.1 THILE			L	Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREFT					
CITY-ST-ZIP	ļ	Douges	3.4. CHY-5	1-ZIP		·	7 a.	1 1 1 1 1 1 1 1
TITLE		☐ D€LE₹E	4.1 TITLE	1		L	_ Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				

14. To 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 logal 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 adoless.

5.1 TITLE 5.2 NAME

6 1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - 7(P

DELETE

DELETE

IONATURE. Janel D. Kal

ulula-

☐ Change

Change

Addition

Addition

FILED

Apr 23 1997 8:00am

Secretary of State