


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000082686 1. Entity Name CORNERSTONE PROPERTIES OF SARASOTA, INC.	
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Principal Place of Business 2156 10TH STREET SARASOTA, FL 34237	Mailing Address 2156 10TH STREET SARASOTA, FL 34237
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02172006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0718369	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KAUFFMAN, SCOTT 2156 10TH STREET SARASOTA, FL 34237

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000471273 03/28/06-20047-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KAUFFMAN, K. SCOTT 1645 FOX CREEK DR SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHUE, MICHAEL 7115 INDIAN BOW LANE SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHUE, RICHARD 2546 RIVER RIDGE RD SARASOTA, FL 34239
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHUE, LARRY 7030 RICHARDSON RD SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **03/14/06** **366-9651**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #