

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000082686**

1. Entity Name  
CORNERSTONE PROPERTIES OF SARASOTA, INC.



Principal Place of Business

2156 10TH STREET  
SARASOTA, FL 34237

Mailing Address

2156 10TH STREET  
SARASOTA, FL 34237



01172007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0718369

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

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 title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KAUFFMAN, K. SCOTT
STREET ADDRESS	1645 FOX CREEK DR
CITY - ST - ZIP	SARASOTA, FL 34240
TITLE	VP
NAME	SHUE, MICHAEL
STREET ADDRESS	7115 INDIAN BOW LANE
CITY - ST - ZIP	SARASOTA, FL 34240
TITLE	S
NAME	SHUE, RICHARD
STREET ADDRESS	2546 RIVER RIDGE RD
CITY - ST - ZIP	SARASOTA, FL 34239
TITLE	T
NAME	SHUE, LARRY
STREET ADDRESS	7030 RICHARDSON RD
CITY - ST - ZIP	SARASOTA, FL 34240
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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02/05/07-80031-017 150.00

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

K. Scott Kauffman 01/29/07 941-366-9651