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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P9600083115 (1) SUMMIT FINANCIAL GROUP OF SARASOTA, INC.

SUMMIT	FINANCIAL GROUP OF SA	ARASOTA, INC.	., <u> </u>						
Principal Place of Business         Mailing Address           1800 2ND ST         1800 2ND ST           SUITE 708         SUITE 708           SARASOTA FL 34236         SARASOTA FL 34236-5903									
					3. Date Inco 10/04/19	rporated or Qualified 396	3a. Da	te of Last Re	eport
2. Principal P 21 1800	ce of Business 28. Mailing Address 26. 1800. 2		S7.			4. FEI Number 65-0700119		Applied For Not Applicable	
Suite, Apt.	105	Suite, Apt. #, etc. 27 Suite 105			5. Certificate	of Status Desired		\$8.75 / Fee Re	
City & Stat	some Fu	City & State  28 SA RAS OTA	C4		<b>.</b>	ampaign Financing Contribution		\$5.00 Added 1	
Zip 34 2	25 Country		Country 30		Florida St		Yes	] No	. 199.032,
GAR 1800 SUIT	9. Name and Address of Curre BEDIAN, THOMAS I 2ND ST TE 708 ASOTA FL 34236	nt Registered Agent	81 82 83	Street Ac	tomas G dress (P.O. Box No. 240 S te 705	d Address of New R	ble)		Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.056 egistered agost, or both, in the Statem familiar way, and accept the original statement of the control		ithorized by ida Statutes		proporation submits ration's board of disquired when renstating)	his statement for the rectors. I hereby acce	PL purpose of ept the app	85 Zip Changing it cintment as	
12.		ND DIRECTORS	13.			CHANGES TO OFFI			S IN 12
TITLE	D CARREDIAN THOMAS	DELETE	1.1 TITLE					Change	Addition
NAME STREET ADDRESS	GARBEDIAN, THOMAS 1800 2ND ST SUITE 708 SARASOTA FL 34236		1.2 NAME 1.3 STREET		1800 ZND	Sr. Suit	L 703		
CITY-ST-ZIP TITLE	SANASUIA FL 34230	DELETE	14 CITY-ST 2.1 TITLE	- ZIP	SARASOTA,	FL. 34236		Change	Addition
NAME			2.2 NAME		¥f" Urainda ≤	LUACELOH		C1 cuande	THE MOUNTAIN
STREET ADDRESS CITY-SI-ZIP			2.3 STREET 2 4 CHY-S	•	800 2ND	ST. SUTE	705		
TITLE NAME STREET ADDRESS		☐ DELETE	3.1 11TLE 3.2 NAME 3.3 STREET	ADDRESS				Change	Addition
CITY-ST-ZIP TITLE		DELETE	3.4, CITY - S 4.1 TITLE 4.2 NAME	I-ZIP				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			4.2 NAME 4.3 STREET A 4.4 CITY-ST	ì					
TITLE NAME STREET ADDRESS		☐ DELETE	51711LF 5.2 NAME 5.3 \$186817	ADDRESS				Change	Addition
TITLE NAME STREET ADDRESS		DELETE	5.4 (CITY - ST 6.1 TITLE 6.2 NAME 6.3 (STREET)					Change	Addition
CITY-ST-ZIP			6.4 CITY - ST			27(0)(2) Et Out			

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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 oddress.