2004 FOR PROFIT CORPORATION

May 03, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P97000002445 SARÁSOTA COMMERCIAL MANAGEMENT, INC. Principal Place of Business Mailing Address 1937 GOLF STREET 1937 GOLF STREET SARASOTA, FL 34236 SARASOTA, FL 34236 CR2E034 (10/03) 04092004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0729267 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PARKER, MINDY K DO NOT WRITE 1937 GOLF STREET SARASOTA, FL 34236 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. U00000145937 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees 05/03/04-80044-024 150.00 After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10, TITLE NAME PARKER, MINDY K 1937 GOLF STREET STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34236 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY+ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

FILED