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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000010697 (5)

SARASOTA STORE, INC.

Principal Place of Business

Mailing Address

FILED Apr 03 1998 8:00am Secretary of State



521 N.W. 131 GAINESVILLE		521 N.W. 13TH STREET Gainesville Fl 32601		DO NOT WRITE IN THIS SPAC 3. Date Incorporated or Qualified 01/30/1997	E
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 1279	BENEVARUAD S.	26		59-3428219	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	
		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
24 34232 25 29			Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	<u> </u>
	ROSS, JONATHAN P		81 Name	MICHAEL D. GORE	
301 CRAWFORD BLVD.			82 Street	Address (P.O. Box Number is Not Acceptable)	·
SUITE 200			83	521 N.W. 1374 STREET	
BU	OCA RATON FL 33432				
			84 City	SAINESVILLE FL 85	Zip Code 3260
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statut	es, the above-named	corporation submits this statement for the purpose of chan	ging its registered
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, Fl	orida Statutes.	oration's board of directors. I hereby accept the appointm	
SIGNATURE	Muhay D.	you w	ICHAEL O	LORE VICEPRESIDENT & OKRAST REQUIRED WHICH TRINSTALLED	M2 352 RUA
12.	Signature, typed or printed name of Angistered ages OFFICERS AND		Registered Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRE	
TITLE	D	DELETE	11 TIPLE		
NAME	GORE, ARTHUR J		1 2 NAME	add g chairman Dr	
STREET ADDRESS	521 N.W. 13TH ST		1.3 STREET ADDRESS	<u> </u>	
CITY-ST-ZIP	GAINESVILLE FL 32601		1.4 CHY - ST - ZIP	also bired or	
THLE	D	DELETE	2 1 TITLE		hange
NAME	SKUKOVSKY, DAVID J		2.2 NAME		
STREET ADDRESS 7604 AUSTER MACKENZIE DRIVE			2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34240	The section	2. 4 CITY - ST - ZIP		
TALE	U FI FIGOURAN ANDOD	⊠ DELETE	3.1 TITLE	□ 0	hange 🔲 Addition
NAME	FLEISCHMAN, ANDOR		3.2 NAME		,
STREET ADDRESS	2019 MALLORY LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	HIGHLAND PARK IL 60035	DELETE	3.4 CITY-ST-ZIP	VICE PRESIDENT & GERATIONS 0	hange 🗶 Addition
NAME		(T) OFFILE		michaeld. Gore	nanga 🖎 Additidh
STREET ADDRESS			4. 2 NAME 4.3 STREFT ADDRESS	521 N.W. 13 TH STREET	
CITY-ST-ZIP			4.4 City - S1 - ZIP	CAINESUILE, FL 32601	}
TITLE		DELETE		PRESIDENT 0	nange 🔀 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	RICHARD LEWIS 521 N.W. 1374 STREET	
CITY-ST-ZIP			5.4 CITY - ST- ZIP	GNNESUILLE, IFL 32601	
TITLE		DELETE	6.1 TITLE	DREJOR DO	hange 🔀 Addition
NAME					
(A) AIRE			6.2 NAME	LAURA SIYUKOVSKY	l
STREET ADDRESS	•		6.2 NAME 6.3 STREET ADDRESS	LAMPA SHUKOVSKY 7604 ALISTER. MACKETZIE DRWE	
			6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP	LANKA SHUKOVSKY 7604 ALISTER. MACKENZIE DRWE SARASOTA, FL 34240	

indicated on this annual report of 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 supplied by annual 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 displication of religious or religious for 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 during education in this limit with an address.