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

**PROFIT** CORPORATION ANNUAL REPORT

Ť

Ħ 100

Ħ,

AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS

THE RESERVE THE PROPERTY OF THE PARTY OF THE

.

THE STATE OF THE S

CITY-ST-ZIP

1998



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P9700054411 (8)

PHIL THE MOVER OF SARASOTA, INC.

Principal Place of Business Mailing Address 2926 MARKRIDGE ROAD 2926 MARKRIDGE ROAD SARASOTA FL 34231 SARASOTA FL 34231 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/19/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 173448 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 30 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 AMERILAWYER CHARTERED PHILLIP FROMMHOLZ Address (P.O. Box Number is Not Acceptable)

926 MARKRIDGE ROAD 343 ALMERIA AVENUE 82 CORAL GABLES FL 33134 63 84 City SARASOTA 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am applied the obligations of Section 607.0505, Florida Statutes. SIGNATUR (NOTF: Registered Agent signature required when reinstating) red agent and blio ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 1(1) 6 TITLE FROMMHOLZ, PHILIP L 1.2 NAME NAME 2926 MARKRIDGE ROAD 1.3 STREET ADDRESS STREET ADDRESS **BARASOTA FL 34231** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE WEBER, JUDITH M 22 NAME NAME 2926 MARKRIDGE ROAD 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE 3.2 NAME **NUTTER, TED** NAME **2926 MARKRIDGE ROAD** 3.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition DELETE TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I 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 or supplemental 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 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, of on an attachment with an address.

6.4 CITY-ST-ZIP

4-2-98

**FILED** 

Apr 29 1998 8:00am

Secretary of State