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

**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

### DOCUMENT # P97000054411

1. Corporation Name

# FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90072 016 \*\*\*150.00

Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.	See MARKROID A 1, 3421   SARKSOIA FL 34231   SAR	PHIL IN	1E MUVER OF SARASUTA,	INC.		456953 - 90072 - 10	,
Principles raises of observes in desires (P.O.) 288 MARKINDOE ROAD SARASOTA FL 34231  2. Principal Place of Business	See MARKROID A 1, 3421   SARKSOIA FL 34231   SAR						
2828 MARKPIDGE ROAD SARASOTA FL 34231  28	200 NOT WRITE IN THIS SPACE	Principal Plac	ce of Business	Mailing Address		-{	
SARASOTA FL 34231  SARASOTA FL 34231  2. Principal Place of Business 2. Principal Place of Bu	SARASOTA FL 34231   SARA	,					
2. Principal Piace of Business   2a. Mailing Address   4. FEI Number   Applied For   A	2. Principal Piace of Business 2. 2a. Mailing Address 4. FEI Number 65-07/3448	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Companies   Comp	2. Principal Piace of Business	Ì	_			DO NOT WRITE IN THE	S SPACE
2. Principal Place of Business   2a	2. Mainting Address   2. Mainting Address   3. Mainting Address					· ·	
Sulfo, Apt. 4; etc.    Sulfo, Apt. 4; etc.	Sulfa, Apt. R. etc.	 		<del></del>			
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   City & Country   St. 700 May Be Added to Fees   City & State   City	Suite, Apt #, etc.  27	2. Principal P	Place of Business	2a. Mailing Address		<b>↓</b> " . " . " . " "	Applied For
City & State  Ci	City & State	21		26		65-0773448	Not Applicable
City & State	City & State  City & Country  City & State  City & Country  City & State  City & State	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	\$8.75 Additional
Zip   Country   Zip   Country   Zip   Country   St. Trust Fund Contribution   Addied to Pees   Addied to Pees   Zip   Zip   Country   St. Trust Fund Contribution   Addied to Pees   Zip	Zip   Country   Zip   Country   Zip   Country   B. This corporation was the current year triangible   Personal Property Tax   Description   Personal Property Tax   Description   Description   Personal Property Tax   Description   Descript	22		27		J. Certificate of Status Desired	Fee Required
23   26   27   Country   Zip   Country   Zip   Country   8. This comporation owes the current year intangulus   Personal Property Tax.   Yes   No.	25   29   20   29   30   30   50   50   50   50   50   50	City & Stat	te	City & State		6. Election Campaign Financing	\$5,00 May Be
25   29   39   Personal Property Tax.   Yes   No    9. Name and Address of Current Registered Agent   51   Name    FROMMHOLZ, PHILIP   2926 MARKRIDGE ROAD SARASOTA FL 34231   52   Street Address (P.O. Box Number is Not Acceptable)    11. Persuant to the provisions of Sections 607.0502 and 607.1508, Fiorids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registeries agent, or both, in the State of Product Such change was submitted by the corporation's board of directors. I hereby accept the exporiment as registered office or registeries agent, or both, and accept the obligations of, Section 607.0502, Fiorids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registeries, and accept the obligations of, Section 607.0502, Fiorids Statutes, the above-named corporation's board of directors. I hereby accept the exponitionent as registered office or registeries, because the obligations of Section 607.0502, Fiorids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registeries, and accept the obligations of Section 607.0502, Fiorids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of the submit of the spontant of the purpose of changing its registered office of the submit of the purpose of changing its registered office of the submit of the purpose of changing its registered of directors. I hereby accept the exponential statutes are registered agent as a purpose in purpose of changing its registered of directors. I hereby accept the exponential statutes are registered agent as a purpose in purpose of changing its registered of directors. I hereby accept the exponential statutes are registered agent as a purpose in purpose of changing its registered of the purpose of changing its registered of the purpose of changing its registered of the purpose of changing its registere	9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fortida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and smillar with, and accept the obligations of, Section 607,0505, Fortida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and smillar with, and accept the obligations of, Section 607,0505, Fortida Statutes, Principle of Statutes, Pri	23		28		Trust Fund Contribution	
FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  18. Street Address (P.O. Box Number is Not Acceptable)  Street Ad	PROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  10. Name and Address of New Registered Agent  Street Address (P.O. Box Number is Not Acceptable)  82  Street Address (P.O. Box Number is Not Acceptable)  83  44 City  FL  85  Zip Code  41. Pursuant to the provisions of Sections 607 0502 and 607 1508. Floridis Statutes, the above-named corporation authmits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Floridis Statutes.  SIGNATURE  Signature, typed or preted name of registered agent and the ill applicable.  FROMMHOLZ, PHILIP L  DELETE  11 TITLE  PD  DELETE  11 TITLE  D	Zip	Country	Zíp	Country	8. This corporation owes the current year In	tangible
FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  83  84 City FL  55 Zip Code  FL  65 Tip Code  FL  6	FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorida Statutes, the above-named corporation authmits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE Signature, hynd or priest awar of angitive righet and the largitizate.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD DELETE 11 TITLE S ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE S SARASOTA FL 34231  LACTY-ST-2P  TITLE S SARASOTA FL 34231  LACTY-ST-2P  TITLE S SARASOTA FL 34231  TITLE S SARASOTA FL 34231  LACTY-ST-2P  TIT	24	25	29	30		
FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City   FL   85 Zip Code  11. Pursuant to the provisions of Sections 697.0502 and 697.1508, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered objective disparsed agent use of changing its registered objective disparsed agent use the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Signutes, the above-named corporation submits this statement for the purpose of changing its registered objective disparsed agent use and some installations. I hereby accept the appointment as registered agent. I am familiar when rejeasing to the appointment as registered agent. I am familiar when rejeasing to the appointment as registered agent. In a minimal part of directors. I hereby accept the appointment as registered agent. In a minimal part of directors. I hereby accept the appointment as registered agent. In a minimal part of directors. I hereby accept the appointment as registered agent. In a minimal part of directors. I hereby accept the appointment as registered agent. In a minimal part of directors. I hereby accept the appointment as registered age	FROMMHOLZ, PHILIP 2926 MARKRIDGE ROAD SARASOTA FL 34231  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City		9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	Agent
2926 MARKRIDGE ROAD SARASOTA FL 34231  83  84 City  FL  85 Zip Code  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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City  PD  OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PROMMHOLZ, PHILIP L  STREET ADDRESS  STREET ADDRESS  CITY-ST-2P  TITLE  VEBER, JUDITH M  STREET ADDRESS  CITY-ST-2P  TITLE  T  OFFICERS AND DIRECTORS IN 12  14. City  Addition  NAME  VEBER, JUDITH M  22 NAME  22 NAME  23 STREET ADDRESS  CITY-ST-2P  TITLE  T  OFFICERS AND DIRECTORS IN 12  14. City  Addition  NAME  NUTTER, TED  33 STREET ADDRESS  CITY-ST-2P  34 NAME  43 STREET ADDRESS  CITY-ST-2P  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECT	2826 MARKRIDGE ROAD SARASOTA FL 34231  83  84 City FL  85 Zip Code  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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PD DELETE 11 TITLE PROMMHOLZ, PHILIP L 12 NAME FROMMHOLZ, PHILIP L 13 NAME FROMMHOLZ, PHILIP L 13 NAME STREET ADDRESS CITY-ST-2P  SARASOTA FL 34231  14 CITY-ST-2P  TITLE S DELETE 21 TITLE S DELETE 21 TITLE S DELETE 31 TITLE S DELETE	rno.	MANAGO Z DINI ID		81 Name		•
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### City	### City ###				02 0.0007.00.0	( 10. Box ( ambo)	
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Agent. I am familiar with, and accept the obligations of, Section 607.0505, Floridal Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   DATE	agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature. Sign	11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the above-named corpo	pration submits this statement for the purpose of	changing its registered
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Signature, tyred or printed army of registered agent and title if applicable. (NOTE: Registered Agent signature required when remainship)   DATE	Signature, typer or printed ramp of registance against any state is applicable. (NOTE: Registance Against signature required when reinstating)   DATE	-	in lamiliar with, and accept the obing	ations of, Section out .0000, Fio	ida Qialdies.		
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NAME   WEBER, JUDITH M   22 NAME   2926 MARKRIDGE ROAD   23 STREET ADDRESS   CITY-ST-ZIP   SARASOTA FL 34231   2 4 CITY-ST-ZIP     DELETE   3.1 TITLE     Change   Addition   Addition   NAME   NUTTER, TED   32 NAME   STREET ADDRESS   CITY-ST-ZIP   DELETE   DELETE   1.1 TITLE   Change   Addition	NAME   WEBER, JUDITH M   222NAME			☐ DELETE		<del></del>	☐ Change ☐ Addition
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6.4 CITY-ST-ZIP 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, or on an attachment with an address, with all otherplike empowered.

SIGNATURE:

4-24-99 954-3838