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

**PROFIT** 

Jun 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # P970000 68181 SITE AMENITIES OF SOUXTHEAST FLORIDAX INC. era we constitute talks sometime Principal Place of Business Mailing Address 1133 4th Street, Suite #200 DO NOT WRITE IN THIS SPACE Sarasota, Fl 34236 3. Date Incorporated or Qualified 08/06/97 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 65-0752769 21 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent TULLY, EUGENE A Eugene A. Tully III 8453-4 GARDENS CIRCLE 8treet Address (P.O.Box Number is Not Acceptable) 6032 Marella Drive 82 SARASOTA FL 34243 84 City Zip Code 3 4 2 4 3 11. Pursuant to the provisions of Sections 607,0502 and 607.1508, Floride Statutes, the above-named conforation 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition NAME **TULLY, EUGENE** 1 2 NAME 8453-4 GARDEN CIRCLE 6032 Marella Drive STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34243 CITY-ST-ZIP 1.4 CITY-ST-ZIP Sarasota, Fl DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34228 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE ☐ Addition 6.1 TITLE 40000254247 -06/01/98--01082--010 NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** \*\*\*150.00 CHTY-\$1-ZIP 6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this liling 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 charged, or on an analysis and indirects.

FILED

4/21/92