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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARAMENT OF STATE

Sandra B. Mortham

Secretary of State " DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000071783 (9)

FILED Jun 09 1998 8:00am Secretary of State

SANDY	BAY OF	SIEST	A, INC.											
Principal Place of Business Mailing Address											-{			
							WOLE							
4150 ROBERTS POINT-CIROLE 4150 ROBERTS POINT CIRC SARASOTA FL 34242 SARASOTA FL 34242							INOLE							
											DO NOT WRITE IN THIS SPACE			
											3. Date Incorporated or Qualified			
											08/19/1997			
2. Principal Place of Business					2a. Mailing Address						4. FEI Number		oplied For	
21 525 15 ACH RD. Suite, Apt. #, etc.				26 24/4 855 A Suite, Apt. #, etc.			KI	RIDGE RD.			45-0774103		ot Applicable	
22				27							5. Certificate of Status Desired	\$8.75	Additional equired	
City & State				[27]	City & State						A Fination Company Financian			
23 SARASOTA F			۱ <u>د</u>	h '			į	产人			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	,	Cour	ntry .	===1.	Zφ	· vi ir ,	(ountry			8. This corporation owes or has paid the curre			
24 3424	ا يا	25 S	ARA50194	29	3423	9	30	541	245	o TH	Personal Property Tax due June 30.	–	No No	
9. Name and Address of Current Registered Agent											10. Name and Address of New Registered Agent			
SMITH, DIANNA M								81	Name	Э			,	
2414 BEE RIDGE ROAD								82 Street Addre			ss (P.O. Box Number is Not Acceptable)			
SARA S OTA FL 34239														
								83					,	
								84	City			85 Zip (Code	
					_				,		FL	1 1 '		
11. Pursuant to	o the provisi	ons of Sc	ections 607.0502	and 6	07.1508, Flori	da Statuli	es, the	above	-name	d corpor	oration submits this statement for the purpose of or on's board of directors. I hereby accept the appo	hanging it	s registered	
agent. I ar	n f am ihar wit	th, and a	coept the obligation	ons of	Section 607	.05 05 , Flo	orida S	italules	ine co 3.	rporatio	art's board of directors, Thereby accept the appo	nment as	registered	
SIGNATURE														
· · · · · · · · · · · · · · · · · · ·	Signature, typical		me of registered agost a			(NOT)			nt signatu	re required	d when reinstating) DATE			
12.	PRESIL		OFFICERS AND I	DIHEC	I DI	FIFTE	_!	3. 1 TITLE		т	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR Change	RS IN 12	
NAME											L.	П сляще	ווטוווטווע []	
					2n			1.2 NAME						
STREET ADDRESS 3414 BCC KIDGE A CITY-ST-ZIP STARILS OF B, 1 6					24) 24 - VI			13 STREET ADDRESS						
THLE	JULISOTH, IL				792 39 DELETE			1.4 City-St-7IP				Change	☐ Addition	
NAME					— -			NAME			•	onunge		
STREET ADDRESS									YUUDEGG					
CITY-ST-ZIP								2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP						
TITLE					DELETE			3.1 TITLE				Change	Addition	
NAME							3.2	NAME			-			
STREET ADDRESS									ADDRESS			1	ļ	
CITY-ST-ZIP								CITY-S					/	
TITLE					DI	LETE	_	TITLE		1		Change	Addition	
NAME							4.	2 NAME		1	<u> </u>		10	
STREET ADDRESS							4.3	STREET	AODRESS		-//	7/1	19	
CITY-ST-ZIP							44	CITY-S	r - ZIP			14/	/	
TITLE					☐ DE	LETE	5.1	TITLE			7 1	Charige	☐ Addition	
NAME							5.2	NAME						
STREET ADDRESS							5.3	STREET	ADDRESS					
CITY-ST-ZIP							5.4	CITY-ST	- ZIP					
TITLE					☐ DE	LETE	6.1	TITLE				Change	Addition	
NAME							6.2	NAME			- 6000025537 5	ti		
STREET ADDRESS							6.3	STREET	ADDRESS		-06/03/9801123015)		
CITY-ST-ZIP							6.4	CITY-ST	- ZIP	<u> </u>	***150 . 00			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(t). 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 of 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 prime attachment with an address.

4-21-58