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

PROFIT'
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

P97000093516 (7)

PALMETTO POINT BUILDING CORP.

Principal Place of Business

Mailing Address

FILED Feb 18 1998 8:00am Secretary of State



| 1740 S ORAN SARASOTA F | | | | | 1740 S ORANGE AVE SARASOTA FL 34239 | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1997 |
|---|-----------------|--------------|-----------------------|--------|--|-----------|--|--|-------------|--|
| 2. Principal Place of Business | | | | | 2a. Mailing Address | | | | | 4. FEI Number Applied For S - 0 7 9 0 9 5 0 Not Applicable |
| Suite, Apt. #, etc. | | | | L | Suite, Apt. #, etc. | | | | | Certificate of Status Desired S8.75 Additional Fee Required |
| City & State | | | | 丁 | City & State | | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip 24 | Country 25 | | | | Zip Coun 29 30 | | | , | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| | 9. Name | Regi | Istered Agent | | | | | 10. Name and Address of New Registered Agent | | |
| FIT | ZER, MARY | /IN | | | _ | | B1 | Νε | me | |
| 174 | 40 S ORAN | | 82 Street Add | | | eet Addre | ress (P.O. Box Number is Not Acceptable) | | | |
| SARASOTA FL 34239 | | | | | | | | - | | |
| | | | | | | | 84 | ' ' | • | 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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | | |
| DIONATURE | | | ne of registered agen | | | _ | | | | red when reinstating) DATE |
| 12. | | | OFFICERS AND | | | 13. | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE NAME | Presi Marvi | dent n Fi | tzer | | DELETE | | ITLE IAME | | | Change Addition |
| STREET ADDRESS | 1740 | S. 0 | range A | | | | | ADDR | ESS | |
| CITY-ST-ZIP | | | FL 342 | 39 | | | ITY-S | T-ZIP | | |
| TITLE | | cret | | | DELETE | 2.11 | | | J | Change Addition |
| NAME | Marvi | n Fi | tzer | | | 2.2 1 | | | 1 | |
| STREET ADDRESS CITY-ST-ZIP | 1740 Saras | S. O | rangg ₄₂ | 39 | | | | ADDR ST-ZIP | J | |
| TITLE | Treas | urer | | | DELETE | 3.1 1 | FILE | | | Change Addition |
| NAME | Maryi | ŋ Fi | tzer | 17.0 | | 3.21 | AME | | | |
| STREET ADDRESS | Saras | ota. | range A | 35 | | 3.3 8 | TREET | ADDRI | ESS | |
| CITY-ST-ZIP | | | | | The section | | | ST-ZIP | | |
| TITLE | | | | | ☐ DELETE | 4.1 T | | | | ☐ Change ☐ Addition |
| NAME | | | | | | | NAME | | | |
| STREET ADDRESS | | | | | | | | ADDRI | iss | |
| CITY-ST-ZIP | | | | | The section | | ITY-S | T-ZIP | | |
| TITLE | | | | | ☐ DELETE | 5.1 T | | | | ☐ Change ☐ Addition |
| NAME | | | | | | 5.2 N | | | } | |
| STREET ADDRESS | | | | | | | | ADDRE | SS |) |
| CITY-ST-ZIP [| | | | | DELETE | | ITY-SI | T-ZIP | | · Comment of the control of the cont |
| | | | | | וון מבובוב | 6.1 T | | | | Change Addition |
| NAME | | | | | | 6.2 h | | | | 1 |
| STREET ADDRESS | | | | | | 1 | | ADDR | .SS | • |
| CITY-ST-ZIP | ertify that the | informatic | n supplied with | this ! | filing does not dualify f | or the ex | ITY-S | ion s | teted in S | Section 119.07(3)(I), Florida Statutes. I further certify that the information |

Indicated on this annual report or supplied with this litting boes not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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.

SIGNATURE

42/98 94/368-8301