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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000096445 (6)

**SARASOTA LAND COMPANY** 

## **FILED** May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						E EBRINDRE HIR SOUR IRON BONE BONE BONE BONE BONE BONE BONE BO	
2765 HIDDEN SARASOTA F	I LAKE BLVD. 'L 34237		2785 HIDDEN LAKE BLVD. SARASOTA FL 34237			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
A D						11/10/1997	
— ·	lace of Business	F	2a. Mailing Address			4. FEI Number Applied For	
Sulte, Apt.	# Alc	26 Suite A	Suite, Apt. #, etc.			Not Applicable	
22		27	27			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Stat	e	<u>├</u> ─┐ '	City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	28 Zin				Trust Fund Contribution Added to Fees	
<b>—</b>	h		າ ໌	2. This corporation owes of the paid the current year interrigione			
24	25 9. Name and Address of Cu	29 29 April 129		30		Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent	
AC		Tront trogration a rig		81	Name		
	SIP, EDWARD L						
2765 HIDDEN LAKE BLVD. Sarasota Fl. 34237					82 Street Address (P.O. Box Number is Not Acceptable)		
SA.	INGUIN I'L 34231			83			
				84	City	/ <b>85</b> Zip Code	
					,	FL   1   1   1   1   1   1   1   1   1	
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.							
SIGNATURE							
10	Signature, typed or printed name of rug slere		(NOTE Re		nt signaturi	ature required when reinstating)  DATE  ACCULANCE AND DEFECTORS AND DEFE	
12.	UFFICENS	S AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Deficient To Change Addition	
NAME		L.	1.2 N			PRESIDENT Change Addition EDWARD A. ASSIP EDWARD A. HIDDEN KAKE BLUD SARASOTA, FL. 34237	
STREET ADDRESS				1.3 STREET	*DODECC	" TOWARD MITTO MAKE BLUD	
CITY-ST-ZIP				1.4 CITY-S	T ZID	SADACATA EL 3V232	
TITLE		T	DELETE 2.1 TII		1-211	Change Addition	
NAME			2.2 NA				
STREET ADORESS				2.3 STREET	ADDRESS	SS	
CITY-ST-ZIP				2.4 CITY-S			
TITLE			DELETE 31 TIT			Change Addition	
NAME				3.2 NAME			
STREET ADORESS				3.3 STREET	address	ss	
CITY-ST-ZIP				3 4. CITY - ST - ZIP			
TITLE	☐ DELETE		4.1 TITLE		Change Addition		
NAME	AME			4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS	is	
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NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS	is	
CITY-ST-ZIP				5.4 CITY - S	I - ZIP		
TITLE			DELETE 6.1 TIT			Change Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS	ss	
CITY-ST-ZIP				6.4 CITY-S			
14. I hereby o	ertify that the information supplie	ed with this filing does	not qualify for th	e exemp	ion state	tated 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.