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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S60989

(8)

SKINNER GROUP SARASOTA INCORPORATED

Principal Plac	e of Business	Mailing Addre	Mailing Address			- 140015070 418 01441 01440 10441 10441 1	AN DADU DIDIR P			
743 RICHMOND STREET LONDON. ONTARIO. CA N6A3H2			743 RICHMOND STREET LONDON, ONTARIO, CA N6A3H2							
						3. Date Incorporated or Qualific 06/19/1991		Pate of Last 01/1996	•	
2. Principal P	lace of Business	28. Mailing Ad	2e. Mailing Address			4. FEI Number			Applied For	
21		26	··			98-0117859 Not Applicable				
Sulte, Apt. #, etc.		27				5. Certificate of Status Desired		Fee Required		
City & State		City & Stati	— ¬ ′			6. Election Campaign Financing	_		0 May Be	
Zip Country		28]	Zip Country			Trust Fund Contribution	Ц		d to Fees	
24	25	—	30			8. This corporation has fiability f			s. 199.032,	
9. Name and Address of Curre		[29] Current Registered Agen				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
1 414	BRECHT, WILLIAM G		· · · · · · · · · · · · · · · · · · ·	81	Name	10, traine and Addition of North	- Inglatorea	Agont		
	WILLIAMS PARKER, ET AI	1	ļ							
	RINGLING BLVD	L.	8:		Street Addre	ess (P.O. Box Number is Not Acceptable)				
	ASOTA FL 34236			83						
. Oran	100 IN 1 E 07200			_						
				84	City		FL	85 Zij	p Code	
11. Pursuant	to the provisions of Sections (607.0502 and 607.1508, Flo	rida Statutes, the at	L. :0ve-	named corpo	oration submits this statement for th	a purposa a	f changing	its registered	
OTHER OF I	registered agent, or both, in th im familiar with, and accept th	ie State of Florida. Such chi	ange was authorižed	i yd t	the corporation	on's board of directors. I hereby ac	copt the app	pointment a	as registered	
•	The same with a secretary	to congations of, coolien ac	r.ooos, rioned Oldi	utoo.						
SIGNATURE	Signature, typed or printed name of regi	stered agent and trie if applicable	(NOTE Registères	Agen	it signature require	d when reinstaling)	DATE			
12.		ERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	ORS IN 12	
TITLE	PSD DELETE		DELETE 1.1 TIT	1.1 TITLE				Change	e 🔲 Addition	
NAME	SKINNER, PAUL	_	1.2 NA	1.2 NAME						
STREET ADDRESS			1.3 \$1-	1.3 STREET ADDRESS						
CITY-ST-ZIP	LONDON ONTARIO CAN	· · · · · · · · · · · · · · · · · · ·	1.4 Cri	IY-S1-	- ZIF					
TITLE		L	DELETE 2.1 TIT	2.1 TOLE				Change	e 🔲 Addition	
NAME			2.2 NA	2.2 NAME						
STREET ADDRESS			2.3 S1	REE1 A	ADDRESS					
CITY-ST-ZIP			2.4 Ci		I - ZIP					
TITLE			DELETE 3.1 TIT					L Change	e Addition	
NAME			3.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			DELETE 4.1 TIT		I · ZIP			1000		
TITLE								☐ Change	e Addition	
NAME STOYET ADDDESS			4. 2 N/		I DOMESTIC					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE			A.4 CIT Delete 5.1 th		- ZIP			Change	e Addition	
NAME			5.2 NA					Onange	, LI Yourion	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			I							
TITLE			5.4 CIT Delete 6.1 til		- 20			Change	e Addition	
NAME			6.2 NA							
STREET ADDRESS					ADDRESS					
			0.3 311		2.511.00					

CICMATURE.

14. I do hereby certify that the information su information indicated on this annual report I am an officer or director of the corporation appears in Block 12 or Block 13 if common appears.

DOLLOT 51967000200

this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the mental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that deliver or trustee or powered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED

May 02 1997 8:00am

Secretary of State