## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. (	Corporation		# V2245 REALTY OF SARASI	'	(8)				
Principal Place of Business Mailing Address  4121 BEE RIDGE RD. C/O JEFFERSON F. RIDDELL SARASOTA FL 34233 3400 S. TAMIAMI TRAIL. SUITE 2 US SARASOTA FL 34239 US						<b>x</b> 2	Date Incorporated or Qualified		
							03/18/1992	05/01/1995	
2. F 21	F·		2a, Mailing Address 26		4. FEI Number 65-0318912	Applied Not As	d For		
22 S	Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addi	<u> </u>	
	City & State			City & State			Fee Requir		
23	·			28			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
	φ		Country	Zip	Count	try	8. This corporation has liability f		
24		o Name	and Address of Current	29 Pagistared Apont	30	····	Florida Statutes  \[ \] \	′es □ No	
		<u> </u>	and Addices of Carlette	r negistered Agent		11 Name	10. Name and Address of Nev	Registered Agent	
	RIDDELI	L, JEFFER	SON F				(0.0.15)		
		TAMIAMI	TRAIL		[*	Street Add	ress (P.O. Box Number is Not Accep	table)	
	SUITE 2	202 Ota FL 342	220		6	3			
	SANASC	JIN FL 34	238		8	4 City		<b>85</b> Zip Code	
11	Pursuant to	o the provision	ons of Sections 607.0502	and 607.1508. Florida	Statutes the above	hamed corre	ration submits this statement for the p	- FL	
!									
1	amiliar with IATURE	h, and accep	ot the obligations of, Section	on 607.0505, Florida S	Statutes.	poration's boa	to or directors. Thereby accept the ap	ppointment as registered agent.	ed office . I am
1	amiliar with IATURE	h, and accep	DOTT, In the State of Florid; of the obligations of, Section or printed name of registered agent a OFFICERS AND	on 607.0505, Florida S and title if applicable	Statutes. (NOTL: Registered Ac	poration's boa	d when revistaling)	DATE	. I am 
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SIGN 12. HITLE NAME STREET	amiliar with	Signature, by ed of  DP  DEERIN 897 MA	of the obligations of, Section of Printed Prin	on 607.0505, Florida \$ nd title if applicable DIRECTORS	(NOTE: Registered As 13.  IE 1.1 TITL 1.2 NAMI	port signature require	d when revistaling)	DATE  DATE  FFICERS AND DIRECTORS IN	. I am  12
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SIGN 12. HILE NAME STREET CITY-S	amiliar with	DP DEERIN 897 MA NO MEI	of the obligations of, Section of Printed Parts of Registered agent a OFFICERS AND IG, WILLIAM G. DISON PLACE RRICK NY	on 607.0505, Florida \$ nd title if applicable DIRECTORS	(NOTL: Registered Ag	pont signature require  E  E  E  ET ADDRESS  -ST-ZIP  E	d when revistaling)	DATE  FRICERS AND DIRECTORS IN  Change A	. I am  12
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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: Ollie

4/34/56 941-371-8558 Date Dayline Phone #