

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L12819

**Entity Name:** T & M OF SARASOTA, INC.

**Current Principal Place of Business:**

2030 W ALFOT PLACE  
CITRUS SPRINGS, FL 34434

**Current Mailing Address:**

2030 W ALFOT PLACE  
CITRUS SPRINGS, FL 34434 US

**FEI Number:** 65-0141700

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEWIS, KURT F.  
6624 GATEWAY AVE  
SARASOTA, FL 34231 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name FINKLER, THOMAS G.  
Address 6205 NUTMEG AVE.  
City-State-Zip: SARASOTA FL 34231

Title DS  
Name FINKLER, MARLEEN D.  
Address 2030 W ALFOT PLACE  
City-State-Zip: CITRUS SPRINGS FL 34434

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARLEEN FINKLER

DS

01/23/2016

Electronic Signature of Signing Officer/Director Detail

Date