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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **701301** (4)

1. Corporation Name

MAGIC OF MANATEE, CHAPTER OF SWEET ADELINES, INTERNATIONAL CORP.



Principal Place of Business	Mailing Address
C/O MARY DE JONG 207 47TH AVE. DR. WEST BRADENTON FL 34207 US	C/O MARY DE JONG 207 47TH AVE. DR. WEST BRADENTON FL 34207 US

3. Date Incorporated or Qualified	08/11/1960
4. FEI Number	59-6153340
Applied For	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
DE JONG MARY 207 47TH AVE. DR. W. BRADENTON FL 34207

10. Name and Address of New Registered Agent
81 Name Norma Celentano
82 Street Address (P.O. Box Number is Not Acceptable) 1085 Bristol Bay, #1122
83
84 City Bradenton FL 85 Zip Code 34209

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Norma Celentano* **Norma Celentano** DATE **3/30/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEJONG MARY	1.2 NAME	
STREET ADDRESS	207 47TH AVE. DR. WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	V/D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAVITT, UNA	2.2 NAME	
STREET ADDRESS	1017 64TH STREET WEST	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34209	2.4 CITY-ST-ZIP	
TITLE	S/D	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MONAHAN, JEANETTE	3.2 NAME	
STREET ADDRESS	4281 86TH CIR. WEST	3.3 STREET ADDRESS	D Led Ward
CITY-ST-ZIP	BRADENTON FL 34209	3.4 CITY-ST-ZIP	4211-37 St. W.
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VILLAS, GRACE	4.2 NAME	Norma Celentano
STREET ADDRESS	8304 43RD AVE. DR. WEST	4.3 STREET ADDRESS	1085 Bristol Bay, #1122
CITY-ST-ZIP	BRADENTON FL 34209	4.4 CITY-ST-ZIP	Bradenton, FL 34209
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEJONG, MARY	5.2 NAME	Anita Walker
STREET ADDRESS	C/O MARY DE JONG	5.3 STREET ADDRESS	7700 Geneva Lane
CITY-ST-ZIP	BRADENTON FL 34207	5.4 CITY-ST-ZIP	Sarasota, FL 34243
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POWERS, ALICE	6.2 NAME	S/D
STREET ADDRESS	C/O MARY DE JONG	6.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34207	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Norma Celentano* **Norma Celentano** DATE **4/30/98** TELEPHONE **941/945-3626**

CR2E037 (10/97)