

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701301

1. Entity Name

MAGIC OF MANATEE, CHAPTER OF SWEET ADELINES, INT

**FILED**  
**Feb 15, 2000 8:00 am**  
**Secretary of State**

02-15-2000 90061 027 \*\*\*\*61.25

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 34207-2190  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6153340

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CELENTANO, NORMA  
 5540 FISHERMAN DR.  
 BRADENTON FL 34209

Name **Rose Gratta**  
 Street Address (P.O. Box Number is Not Acceptable)  
**3806 60 St W**  
 City **Bradenton** FL Zip Code **34209**

8. 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

*Rose Gratta*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/5/00

DATE

FILE NOW:  
 FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P/D	MONAHAN, JEANETTE	4281-66 ST CIR W	BRADENTON FL 34209	<input checked="" type="checkbox"/>
V/D	EATON, SALLY	612 ESTUARY DR	BRADENTON FL 34209	<input type="checkbox"/>
D	WARD, LEA	4211-37 ST W	BRADENTON FL 34205	<input checked="" type="checkbox"/>
T	CELENTENO, NORMA	5540 FISHERMANS DR	BRADENTON FL 34209	<input checked="" type="checkbox"/>
D	WOODS, JUDY	432 SPRING LAKES BLVD	BRADENTON FL 34210	<input type="checkbox"/>
SD	POWERS, ALICE	C/O MARY DE JONG	BRADENTON FL 34207	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P/D	Mary DeJong	207 47th Ave Dr W Apt 362	Bradenton FL 34207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V/D	Sally Eaton	3102 43rd St W	Bradenton FL 34209	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T/D	Rose Gratta	3806 60th St W	Bradenton FL 34209	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S/D	Judy Woods	737 Spring Lakes Blvd	Bradenton FL 34210	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Marie Huffman	717 32nd St W	Bradenton FL 34205	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Jeanette Monahan	4281 66th St Cir W	Bradenton FL 34209	<input checked="" type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary DeJong* **NOT REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/00

Date

941-753-8679

Daytime Phone #