

FILED


May 11, 2007 8:00 am
Secretary of State

05-11-2007 90026 038 ****70.00

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 701301

1. Entity Name
MAGIC OF MANATEE, CHAPTER OF SWEET ADELINES,
INTERNATIONAL CORP.



Principal Place of Business
C/O LEA WARD
4211 37TH ST W
BRADENTON, FL 34205-1863 US

Mailing Address
4211 37TH ST W
BRADENTON, FL 34205-1863 US

40110813



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02212007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-6153340

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, LEA R
4211 37TH STREET W
BRADENTON, FL 34205

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

LEA R WARD

SIGNATURE: *Lea R Ward* DATE: 5/1/07

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES DEJONG, MARY 207 47TH AV DR W, APT 362 BRADENTON, FL 34207 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JANICE SHAMBLIN 620 57th AV W B-9 BRADENTON FL 34207 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRATTA, ROSE 3806 60TH ST W BRADENTON, FL 34209 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC CAROL SPANGLER 40 BRADEN CASTLE DR BRADENTON FL 34208 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LINSLEY, ELLEN 628 FOXWORTH LN HOLMES BEACH, FL 34217 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LINSLEY, ELLEN 628 FOXWORTH LN HOLMES BEACH FL 34217 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WARD, LEA R 4211 37TH STREET W BRADENTON, FL 34205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORIS, TINDER 4519 103RD ST CT W BRADENTON, FL 34210 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES DORIS TINDER 4519 103RD ST CT W BRADENTON FL 34210 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINTERS, ANITA 516 24TH AVE W BRADENTON, FL 34205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Lea R Ward, Treas* DATE: 5/1/07 941-739-2611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR