


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90030 001 ****70.00

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



Principal Place of Business
 C/O LEA WARD *Carolyn Spangler*
 4211 37TH ST W *40 Braden Castle Dr*
 BRADENTON, FL 34205 1066 US
 Bradenton, FL 34208

Mailing Address
 4211 37TH ST W
 BRADENTON, FL 34205-1063 US
 P.O. Box 1523
 Bradenton, FL 34206



03132008 No Chg-NP CR2E037 (4/06)

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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
Spangler, Carolyn

Ca Spangler, Carolyn
40 Braden Castle Dr.
Bradenton, FL
34208

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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.

SIGNATURE *Carolyn A. Spangler* DATE 4-21-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	D S
NAME	SHAMRIEN, JANICE <i>Shamblen, Janice</i>
STREET ADDRESS	620 57TH AVE LN B-9
CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	S TD
NAME	SPANGLER, CAROLYN
STREET ADDRESS	40 BRADEN CASTLE DR
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	V D
NAME	LINSLEY, ELLEN
STREET ADDRESS	628 FOXWORTH LN
CITY-ST-ZIP	HOLMES BEACH, FL 34217
TITLE	FD D
NAME	WARD, LEA R <i>Baker, Michele</i>
STREET ADDRESS	4211 37TH STREET W <i>4422 19th St. Circle W.</i>
CITY-ST-ZIP	BRADENTON, FL 34205 <i>Bradenton, FL 34207</i>
TITLE	P D
NAME	DORIS, TINDER
STREET ADDRESS	4519 103RD ST CT W
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	SD D
NAME	WINTERS, ANITA <i>Greer, Betsy</i>
STREET ADDRESS	546 24TH AVE W <i>9911 Cape Haze Circle</i>
CITY-ST-ZIP	BRADENTON, FL 34205 <i>Parrish, FL 34219</i>

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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: *Carolyn A. Spangler* DATE 4-21-08 DAYTIME PHONE # (941) 932-7583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR