

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 724615**

1. Entity Name

MEALS ON WHEELS PLUS OF MANATEE, INC.**FILED****Jun 16, 2002 8:00 am**
Secretary of State

05-16-2002 90089 028 ****70.00

Principal Place of Business Mailing Address
811 23RD AVENUE EAST 811 23RD AVENUE EAST
BRADENTON FL 34208 BRADENTON FL 34208

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1420986** Applied For
Not Applicable
5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent**

Name: **ROBERT BECK**
Street Address (Or Box Number, Not Acceptable): **8433 Enterprise Circle, #110**
City: **Bradenton, FL 34202**
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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

6/3/02
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 **TD** ☐ Delete
NAME **CRAIG, MIKE**
STREET ADDRESS **9238 19TH DRIVE NW**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **VD** ☐ Delete
NAME **BECK, ROBERT**
STREET ADDRESS **8308 12TH AVENUE DRIVE NW**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **SD** ☐ Delete
NAME **NOLAN, DAN**
STREET ADDRESS **1307 70TH STREET NW**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **PD** ☐ Delete
NAME **KESTEN, MURRAY**
STREET ADDRESS **6703 ARBOR OAKS DRIVE**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **ED** ☐ Delete
NAME **CAMPBELL, ELLEN J.**
STREET ADDRESS **8505 44TH AVE EAST**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Change ☐ Addition
NAME **ROBERT BECK**
STREET ADDRESS **8433 Enterprise Circle, #110**
CITY-ST-ZIP **Bradenton, FL 34202**

TITLE **VD** ☒ Change ☐ Addition
NAME **DARRELL TRUNER**
STREET ADDRESS **2504 64th St. Ct. E.**
CITY-ST-ZIP **Bradenton, FL 34208**

TITLE **TD** ☒ Change ☐ Addition
NAME **JOHN HARTLEE IV**
STREET ADDRESS **2308 US Hwy 301 N.**
CITY-ST-ZIP **Palmetto, FL 34220**

TITLE **SD** ☒ Change ☐ Addition
NAME **JOE ROUSSEAU**
STREET ADDRESS **4504 30th St. W.**
CITY-ST-ZIP **Bradenton, FL 34207**

TITLE **ED** ☐ Change ☐ Addition
NAME **ELLEN CAMPBELL**
STREET ADDRESS **811 23rd Ave. E.**
CITY-ST-ZIP **Bradenton, FL 34208**

TITLE ☐ Change ☒ Addition
NAME **Member at Large**
STREET ADDRESS **TERRY POMFRET**
CITY-ST-ZIP **2155 12th St., Sarasota, FL 34237**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 signature like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)