

FILE NOW: FILING FEE IS \$61.25

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Mar 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 739165 (9)
1. Corporation Name
MANATEE CHILDREN'S SERVICES, INCORPORATED



Principal Place of Business 1101 6TH AVE WEST STE. 218 BRADENTON FL 34205	Mailing Address 1101 6TH AVE WEST STE. 218 BRADENTON FL 34205-7705
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3. Date Incorporated or Qualified 05/26/1977	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1771210	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**ACKERMAN, LYNDA
1101 6TH AVE. WEST.
STE. 218
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

**81 Name
Nancy McCarty**
**82 Street Address (P.O. Box Number is Not Acceptable)
1101 6th Avenue West**
83 Suite 218
**84 City
Bradenton, FL** **85 Zip Code
34205**

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 Nancy McCarty DATE 1-27-97

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	KIZER, DIANA	
STREET ADDRESS	402 43RD ST. W.	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	<input type="checkbox"/> DELETE
NAME	OBRIEN, THOMAS	
STREET ADDRESS	201 73RD ST NW	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	PROUTY, STEVEN W	
STREET ADDRESS	1205 MANATEE AVE. W.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	RATH, RICHARD	
STREET ADDRESS	339 46TH ST. W.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	NICHOLAS, ED	
STREET ADDRESS	1112 MANATEE AVE WEST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	DORRIS, GINNY	
STREET ADDRESS	339 6TH AVE WEST	
CITY-ST-ZIP	BRADENTON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kizer, Diana	
1.3 STREET ADDRESS	402 43rd St. W.	
1.4 CITY-ST-ZIP	Bradenton, FL 34209	
2.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Carol Nelson	
2.3 STREET ADDRESS	3304 Palma Sola Blvd.	
2.4 CITY-ST-ZIP	Bradenton, FL 34209	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Prouty, Steven W.	
3.3 STREET ADDRESS	1205 Manatee Ave. W.	
3.4 CITY-ST-ZIP	Bradenton, FL 34205	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Rath, Richard	
4.3 STREET ADDRESS	339 46th St. W.	
4.4 CITY-ST-ZIP	Bradenton, FL 34205	
5.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Nicholas, Ed	
5.3 STREET ADDRESS	1112 Manatee Ave West	
5.4 CITY-ST-ZIP	Bradenton, FL 34205	
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Dorris, Ginny	
6.3 STREET ADDRESS	339 6th Ave West	
6.4 CITY-ST-ZIP	Bradenton, FL	

14. I do 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 Nancy McCarty DATE 1-27-97 941-746-1904

CR2E037 (9/96)



Dedicated to breaking the cycle of child abuse

Additional Directors

D

HANNON, TOM
303 13th AVENUE EAST
BRADENTON, Florida 34208

D

DUNN, KAREN
6704 STONE RIVER ROAD
BRADENTON, Florida 34203

D

DENNIS, KERRY
4040 IRONWOOD CIRCLE #F-303
BRADENTON, Florida 34209

DS

MCCARTY, NANCY
102 49th STREET WEST
BRADENTON, Florida 34209

D

LOWE, William
547 CHEVY CHASE DRIVE
SARASOTA, Florida 34243

D

MARTIN, Rob
N/A

D

O'BRIEN, TOM
201 73rd STREET NW
BRADENTON, Florida 34209

D

O'HARA, JEAN
N/A