NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

2a. Mailing Address

Suite, Apt, #, etc.

26

DIVISION OF CORPORATIONS

DOCUMENT # 739165

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

MANATEE CHILDREN'S SERVICES, INCORPORATED

Mailing Address
1101 6TH AVE WEST
STE. 218 Bradenton Fl. 3420

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90078 037 ****70.00

Applied For

Not Applicable

363984 - 90193 - 3



3. Date incorporated or Qualifed

05/26/1977

59-1771210

4. FEI Number

City & Sta	ite	City & State			5. Certificate of Status Desired		\$8./5 A		
23		28					Fee Rec	mileo	
Zip	Country	Zip	Country	1	6. Election Campaign Financing		\$5.00 N	Aay Be	
24	25	29 30	o		Trust Fund Contribution		Added to	Fees	
	9. Name and Address of Current R	legistered Agent			10. Name and Address of New R	legistered A	gent		
			81	Name				1	
MCCART	Y, NANCY		82	Street Ar	ddress (P.O. Box Number is Not Accepte	ble)			
,	•		02	30000	adiess (F.O. box Horrison is tract to-spec	,			
	1 AVENUE WEST		83	l					
SUITE 21			<u></u>				T-1		
BRADEN	TON FL 34205	·	84	City		FL	85 Zip C	OCIE	
44 Dimension	the the previous of Continue 617 0502 a	on 617 1508 Florida Statutes	the show	e-named co	proporation submits this statement for the	purpose of o	hanging its r	egistered	
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 Stones of printed region and the if registered Right and the if applicable (NOTE) Registered Right applicable (NOTE) Registered Right applicable (NOTE) Registered Right applicable (NOTE) Registered Right applicable (NOTE)									
 _	Signature-apped or printed neither of registered ligent an		13.	t Mousena Lade	ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	IS IN 12	
12.	OFFICERS AND	DELETE	1.1 TITLE		7201101101011100010		Change	Addition	
TITLE :	TD	D DELETE					- •	_	
NAME !	KIZER, DIANA		1.2 NAME						
STREET ADORESS	1000 1000		1.3 STREE	ADDRESS					
CTTY-ST-ZIP	BRADENTON FL		1.4 CITY-S	T-ZIP				ATT Addition	
TITLE	D	DELETE	21 TITLE]_	VP		Change	Addition !	
NAME .	OBRIEN, THOMAS		2.2 NAME	<u> </u>	Jim Wells	.)			
STREET ADDRESS	s 201 73RD ST NW		23 STREE	FADORESS 3	3508 - 7 - 31		- 1		
CITY-ST-ZIP	BRADENTON FL		2.4 CITY-5	T-ZP	ralmetto, &	342			
TITLE	D Q	DELETE	3.1 TITLE	L	<u>)</u> , , ,		Change	Addition	
NAME -	PROUTY STEVEN W		32 NAME	 	tileen-Haines-				
STREET ADDRESS			3.3 STREE	TADORESS 3	1806 - 34th Am	ω			
CITY-ST-ZP	BRADENTON FL		3.4. CITY-5	iT-ZIP	Brade Atom FL	24 QC	کد		
TITLE	D	DELETE	4.1 TITLE	17	5		Change	Addition	
NAME	RATH, RICHARD		4.2 NAME		nichele Balcolm			-	
STREET ADDRESS	200 4000 (0000000 104			TADDRESS /	007 - 133-0 St	3			
	BRADENTON FL		4.4 CTY-5		Bradenton 71) .		
TITLE :	PD	☐ DELETE	5.1 TITLE	·			Change	Addition	
	NICHOLAS, ED		5.2 NAME	1	Victulas, Ed		-		
NAME :	1	7		ADDRESS	1112 Manatu Au	e W			
STREET ADDRESS			5.4 CITY-9	, ,	a code a tra =1 3	4205			
CITY-ST-ZIP	BRADENTON FL	☐ DELETE	6.1 TITLE	7" EF	brace Cion, 45	700	Change	Addition	
πLE	V TOWARD CARE DRI		62 NAME		Take in a maine	2.11	Managa		
NAME	TOKAJER, CAPT BILL				Tokajer, major (וויכ			
STREET ADORESS		→ 1		ADDRESS	1004- 40 ALL W	1005			
CITY-ST-ZIP	BRADENTON FL 34205		6.4 CITY-S	T-ZIP	Bradenton, 7134	700-3	E. Mat the 1-	la-matian	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Planta 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, with all other like empowered.

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