2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752617 1. Entity Name 04-24-2002 90273 043 ****61.25 THE LITERACY COUNCIL OF MANATEE COUNTY, INC. Principal Place of Business Mailing Address 1701 14TH STREET WEST. SUITE 3 1701 14TH STREET WEST. SLITE 3 **BRADENTON FL 34205 BRADENTON FL 34205** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2116479 Not Applicable \$8.75 Additional Country Country Ζiρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) WELLS, REBECCA W 6614 27TH AVE DR W BRADENTON FL 34209 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. President <u>(9</u> Delete Change Change TITLE MLE Mary K. Corbin OWENS, BILL B NAME NAME 101 29th St. N.W. CR2E037 7312 CALAGESIA DRIVE STREET ADDRESS STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP CITY-ST-ZIP sarasota FL 34843 ☐ Change Addition VICE President Delete TITLE 7ITI F WELLS, REBECCA W NAME NAMÉ STREET ADORESS 6614 27TH AVE DR W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP ☐ Addition Channa 🗹 Delete Secretary TITLE - soyce-Hurkman PADANGE, HELEN NAME KAME-4111-8RD AVE W STREET ADDRESS 2901 26th St. W. #219 STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP PALMETTO FL 34221 CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TIME

12. Thereby 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 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 attachi

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED May 29, 2002 8:00 am Secretary of State