


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90063 022 ****61.25

DOCUMENT # N01705
 1. Entity Name
MANATEE RELIGIOUS SERVICE, INC.



Principal Place of Business
 3111 29TH AVENUE E
 BRADENTON, FL 34208 US

Mailing Address
 3111 29TH AVENUE E
 BRADENTON, FL 34208 US

50014629



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01272005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
59-2547119

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

DONLEY, J E
 3111 29TH AVENUE EAST
 BRADENTON, FL 34208

7. Name and Address of New Registered Agent

Name
Taylor, Lexie O.

Street Address (P.O. Box Number is Not Acceptable)
3111 29th Avenue East

City
Bradenton FL Zip Code
34208-7420

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 *Lexie O. Taylor* *Lexie O. Taylor* **2/8/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAETZ, PAUL 5815 38TH AVE EAST BRADENTON, FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VANDERGRAFE, FRED 214 48TH AVE TERR WEST BRADENTON, FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DYGERT, ALLAN 950 136TH ST NE BRADENTON, FL 34212	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONLEY, J E 3111 29TH AVENUE EAST BRADENTON, FL 342087420	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PIERSON, BILL 5316 53RD AVE EAST #F45 BRADENTON, FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HUNTER, JERRY 5619 19TH ST WEST BRADENTON, FL 34207	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Platt, Gretchen 808 53rd Avenue East #20 Bradenton, Florida 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D McGrath, Frank 503 70th Street Holmes Beach, FL 34217	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dygart, Allan 950 136th St. N E Bradenton FL 34212	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Taylor, Lexie O. 3111 29th Avenue East Bradenton FL 34208	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Pierson, Bill 5316 53rd Ave East #45 Bradenton FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Hunter, Jerry 5916 19th St West Bradenton FL 34207	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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: *Lexie O. Taylor* *Lexie O. Taylor* **2/8/05** **941-744-5155**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #