## 2004 NOT-FOR-PROFIT CORPORATION

## Mar 18, 2004 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # N11899** 03-18-2004 90047 020 \*\*\*\*61.25 MANATEE COUNTY CATTLEWOMEN ASSOCIATION. Principal Place of Business Mailing Address % JEAN SLAUGHTER % JEAN SLAUGHTER 16659059 3704 51 STREET EAST 3704 51 STREET EAST **BRADENTON, FL 34208** BRADENTON, FL 34208 2. Principal Place of Business 3. Mailing Address 505 US Suite, Apt. #, etc. Suite, Apt. #, etc. 03112004 Chg-NP CR2E037 (10/03) Applied For City & State 4. FEI Number 59-2816095 City & State Bradenton Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired 208 Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARLLEE, JOHN P III Street Address (P.O., Box Number is Not Acceptable)\_\_\_\_ 1205 MANATEE AVENUE WEST BRADENTON, FL 33505 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Make check payable to Due by May 1, 2004 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE X Change Addition Jelane Broxson BAILEY, KIM NAME NAME STREET ADDRESS 8755 FRIE I N STREET ADDRESS 12815 66 St.E. CITY-ST-ZIP PARRISH, FL 34219 CITY-ST-ZIP farrish, FI TITLE ☐ Defete TIN F ☐ Change ☐ Addition LINDSEY, JOHN NAME NAME STREET ADDRESS 10249 CORBETH JOHN RD STREET ADDRESS CITY-ST-7IP PARRISH, FL 34219 CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition Linda Parks ROBERTSON, JANE NAME 4908 51 St.E. STREET ADDRESS 10120 - 25 ST F STREET ADDRESS CITY-ST-ZIP PARRISH, FL 34219 CITY-ST-ZIP Bradenton. 34202 TITLE Delete Change 1 ☐ Addition Debbie Oler 153 Alpine Ct ALBRITTON, IRENE NAME NAME STREET ADDRESS 14950 ALBRITTON RD STREET ADDRESS CITY-ST-7P MYAKKA CITY, FL 34251 CITY-ST-ZIP 34208 Rvadenton ☐ Delete TITLE TITI F ☐ Change ☐ Addition NAME ELLIS, PAM 4 4314 LORRAINE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34211 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition VEHLING, WENDY NAME NAME STREET ADDRESS 13450 GOLF COURSE RD STREET ADDRESS CITY-ST-ZIP PARRISH, FL 34219 CITY-ST-ZIP

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 receivers.

acks nda SIGNATURE

3-11-04 941-746-1067

**FILED**