FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

DOCUMENT #

MANATEE PUBLIC SCHOOLS FOUNDATION, INC.

Principal Place of Business Mailing Address				ומסין הנפגע הומרוש הנסרות הרשבות הרשבות הרשה שהומות החוונה מהומות שרותה! המים השהוהתותה ה
215 MANATEE AVENUE WEST 215 MANATEE AVENUE WES		ST		3. Date Incorporated or Qualified
BRADENTON FL 34205 BRADENTON FL 34205				03/09/1987
				4. FEI Number Applied For
				65-0037451 Not Applicable
2. Principal Place of Business 2a. Mailing Address				5. Certificate of Status Desired S8.75 Additional
21 26				Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be
22 27 City & State City & State				Trust Fund Contribution Added to Fees
City & State 28				7. Is this nonprofit corporation a homeowners association?
Zip Country	Zip	Cou	ntrv	8. This corporation owes or has pald the current year Intangible
24 25	 	30		Personal Property Tax due June 30. Yes No
9. Name and Address of Curre				10. Name and Address of New Registered Agent
			81 Name	
DENSIAR, S. GENE			82 Street	Address (P.O. Box Number is Not Acceptable)
215 MANATE AVE W				19 1 19 1 19 1 19 1 19 1 19 1 19 1 19
BRADENTON FL 34205			83	West Comments
		ţ	84 City	FL 85 Zip Code
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 Signature, byped or printed name of registered agr	ant and title if applicable. (NOTE	: Fleatstered	Agent signature	required when reinstating) DATE
	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	DELETE	1.1 TIT	LE	x[x] Change ☐ Addition
NAME ZIRKELBACH, ALAN		1,2 NA	ME	Ron Allen
STREET ADDRESS 215 MANATEE AVE. WEST		1.3 STRE		}
CITY-ST-ZIP BRADENTON FL			Y-\$T-ZIP	
TITLE STD	☐ DELETE	21 1111	_	Change Addition
NAME KERANEN, JAMES	A de la		ME	
STREET ADDRESS 215 MANATEE AVE. WEST		2.3 STREET ADDRESS		,
CITY-ST-ZIP BRADENTON FL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		XX Change Addition
NAME ALLEN, RON	الما مسواد	3.1 HIE	{	
STREET ADDRESS 215 MANATEE AVE. WEST		3.2 NAME 3.3 STREET ADDRESS		Mac Carraway
PRANCIPAL CI			Y-ST-ZIP	my the second
TITLE DISABLISTOIT L	DELETE	4.1 TJT		☐ Change ☐ Addition
NAME	—	4, 2 NA	1	_ - -

6.4 CITY - ST - ZIP 14. 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 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.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-Z/P

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

CITY-ST-ZIP

ATURE REQUARES [Keranen

DELETE

DELETE

1/8/98 941-741-7685

FILED

Jan 16 1998 8:00am

Secretary of State

77 - L

___ Change

_ Change

Addition

___ Addition