

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 03, 2001 8:00 am**  
**Secretary of State**

02-03-2001 90049 044 \*\*\*\*70.00

**DOCUMENT # N34729**

1. Entity Name

**MANATEE COUNTY RADIO CONTROLLERS, INC.**

Principal Place of Business

P.O. BOX 546  
 BRADENTON FL 34206-7546

Mailing Address

P.O. BOX 546  
 BRADENTON FL 34206-7546

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0311349**

Applied For  
 Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HILLES, DARYL**  
**7105 52ND DRIVE, E**  
**BRADENTON FL 34203**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:  
 FEE IS \$61.25**

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

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BOATMAN, RANDY	
STREET ADDRESS	710 17TH AVE. WEST	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	MUSGROVE, WILLIAM	
STREET ADDRESS	205 66TH AVENUE DR	
CITY-ST-ZIP	BRADENTON FL 34201	
TITLE	DP	<input type="checkbox"/> Delete
NAME	PROBST, MARC	
STREET ADDRESS	1902 26TH ST. WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	2VP	<input type="checkbox"/> Delete
NAME	HILLES, DARYL	
STREET ADDRESS	71015 52ND DR. E	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	WENDELL, KEN	
STREET ADDRESS	606 46TH ST. EAST	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	205 66TH Ave DR.	
STREET ADDRESS	BRADENTON, FLA. 34201	
CITY-ST-ZIP	MUSGROVE, ROSEMARY	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 like empowered.

SIGNATURE: *Daryl Hilles* **DARYL HILLES** 1-22-01 904-755-7688  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)