


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90020 034 ****61.25

DOCUMENT # N34729

1. Entity Name
MANATEE COUNTY RADIO CONTROLLERS, INC.



Principal Place of Business
 P.O. BOX 546
 BRADENTON, FL 34206-7546

Mailing Address
 4415 BLUE MARLIN DR.
 BRADENTON, FL 34208

03014016



2. Principal Place of Business
304 ROTTERDAM AV
 Suite, Apt. #, etc.

3. Mailing Address
304 ROTTERDAM AV
 Suite, Apt. #, etc.

02282004 Chg-NP CR2E037 (10/03)

City & State
~~ELLENTON, FL~~ **FL**

City & State
~~ELLENTON, FL~~ **FL**

Zip Country
34222 MANATEE

Zip Country
34222 MANATEE

4. FEI Number
 65-0311349

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HILLES, DARYL
 3312 50TH AVE E.
 BRADENTON, FL 34203

7. Name and Address of New Registered Agent

Name **SILLER, ROBERT**

Street Address (P.O. Box Number is Not Acceptable)
304 ROTTERDAM AV

City **ELLENTON** FL Zip Code **34222**

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 *Robert Siller* **SECRETARY** **2-27-2004**

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

Filing Fee is \$81.25 Due by May 1, 2004

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	VD WILLIAM, DICK 1308 57TH AVE DR. E. BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DILWORTH, BILLY 4415 BLUE MARLIN DR BRADENTON, FL 34208 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LONG, LAURA 3312 50TH TERR. E. BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSO WALTON, JOHN 530 3RD ST E. BRADENTON, FL 34203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSS, BRUCE 68 MEADOWSLARK CIR ELLENTON, FL 34222 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KROPF, VERN 129 HOLLY AVE BRADENTON, FL 34243 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAY THOMPSON 3307 5th DRIVE WEST PALMETTO, FL, 34221 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DILWORTH, BILLY 4415 BLUE MARLIN DR BRADENTON, FL, 34208 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SILLER, ROBERT 304 ROTTERDAM AV ELLENTON, FL, 34222 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHEELER, RICK 1213 154 ST N.E. BRADENTON FL 34212 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: *Robert Siller* **ROBERT SILLER SD** **2-27-2004** **(941) 628-2165**

Signature and typed or printed name of signing officer or director Date Daytime Phone #