2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9600002176

1. Entity Name

MANATEE COUNTY LIONS SIGHT CONSERVATION, INC.



FILED Feb 03, 2003 8:00 am Secretary of State

02-03-2003 90034 040 ****61.25

Principal Plac	e of Business	Mailing Address							
1219 51ST AVENUE EAST. #93 BRADENTON FL 34203		1219 51ST AVENUE EAST. #99 BRADENTON FL 34203							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		•	4. FEI Number 59-1702646		⊢	pplied For	
Zip	Country	Zip	Country		5. Certificate of S	Status Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current F	Registered Agent			7. Name and Ad	dress of New Registe	ered Agent		
,				Name					
EISENBACH, SAM ,1219 51ST AVENUE EAST, #93 ,BRADENTON FL 34203			Stree	Street Address (P.O. Box Number is Not Acceptable)					
S S			City	City FL Zip Code				de	
SIGNATURE	Signature, typed or printed name of registered agent are: FILE NOW: FEE IS \$61.25	nd title if applicable. (NOTE: I 9. Election Camp Trust Fund Co			\$5.00 May Be Added to Fees	Make C	heck Payable		
	•		-						
10.	OFFICERS AND DIRI	<u> </u>	11.	,	ADDITIONS/CHANG	SES TO OFFICERS AN		(,	
TITLE	*	☐ Delete	TITLE				☐ Change	☐ Addition (
NAME STREET ADDRESS	JOHN MODERACKI		NAME	.				\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
CITY-ST-ZIP	5207 23RD ST. W. BRADENTON FL		STREET ADDRES	3					
TITLE	T							5	
NAME	JOHN LANE	Delete	TITLE NAME	D Ca	arl Block		☐ Change	Addition (
STREET ADDRESS CITY-ST-ZIP	4907 4TH AVE CIR N.W. BRADENTON FL		STREET ADDRES	s 42 Br	269 66th a	Street Ct. F1-34209	West	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDWARD METZGAR 112 WILD PLUM DR. BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIPISH, DALE 1219 51ST ST AVE EAST #168 BRADENTON FL 34203	[X Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	80	able Davis 3 52 ave adenton,	Plaza Wes	□ Change :t	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	35	ella Pras 41 Lake I adenton,I	Bayshore D	□ Change P r	Addition	
TITLE NAME Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	S			☐ Change	Addition	
10 I boroby o	antiful that the information of the desired								

2. 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:

CHIGGEANITE REEdWard Metzgar

01-29-03 (941)756-0270