## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 21, 2007 08:00 AM Secretary of State

ANNUAL KEPUKI						Mar 21, 200 / U8:00 A			
DOCUMENT # P99000111804  1. Entity Name PEERLESS MANATEE, INC.						Se	ecretary o	f State	
Principal Place of Business Mailing Address								J	
932 5TH AVI Palmetto, I		932 5TH AVENUE WEST PALMETTO, FL 34221	932 5TH AVENUE WEST PALMETTO, FL 34221		t ipalient is	: :	19: HESI MBEL MBEJ IBIII BEWI		
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02212007	Chg-P	CR2E034 (12/06	)		
City & State		City & State			4. FEI Numbe 65-097		<b>├──</b>	Applied For Not Applicable	
Zıp	Country	Zip	Coun	try		of Status Desired	See Requi		
	6. Name and Address of Curren	t Registered Agent		Name	7. Name and	Address of New I	Registered Agent		
QUINLAN, JOHN V				INAPPE					
601 12TH	STREET WEST ON, FL 34205		Street Address (		ss (P.O. Box Numbe	er is Not Acceptabl	e)		
								-i.	
		· <del>-</del> · · · · · · · · · · · · · · · · · · ·		City			FL Zip Co		
	named entity submits this statement f lions of registered agent	or the purpose of changing its	registere	ed office or regi	stered agent, or bot	th, in the State of FI	orida. I am familiar witl	n, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Fin Trust Fund Contribution			_	· - ·	\$5.00 May Be Added to Fees				
10.			11.		ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECTO	RS IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, JOHN M 1510 17TH STREET WEST PALMETTO, FL 34221	□ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, R. JAY 1724 17TH STREET WEST PALMETTO, FL 34221	□ Delete				U000 03/29/0	00067482 <del>0</del> <sup>Change</sup> 07-80086-010	□ Addition ( 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		그 Delcte		,			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delcte					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l l			Change	Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete	CITY	E Et address -St-Zip			Change	Addition	
indicated	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp	is true and accurate and that m	v signat	ure shall have ti	he same legal effec	t as if made under	oath: that Lam an office	er or director	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_\_