

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 10, 2001 8:00 am**  
**Secretary of State**

07-10-2001 90109 013 \*\*\*\*61.25

**DOCUMENT # 724615**

1. Entity Name

**MEALS ON WHEELS PLUS OF MANATEE, INC.**

Principal Place of Business

**811 23RD AVENUE EAST  
 BRADENTON FL 34208**

Mailing Address

**811 23RD AVENUE EAST  
 BRADENTON FL 34208**

**C0072638**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1420986**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**ROSS, JAN J  
 423 63RD STREET NW  
 BRADENTON FL 34209**

7. Name and Address of New Registered Agent

Name **Murray Kesten**

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

**6703 Arbor Oaks Drive**

City **Bradenton**

**FL**

Zip Code **34209**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 **TD** ☒ Delete  
 NAME **WHITE, GERALD**  
 STREET ADDRESS **2260 17 ST W.**  
 CITY-ST-ZIP **PALMETTO FL**

TITLE **D** ☒ Delete  
 NAME **DURBECK, PATRICIA**  
 STREET ADDRESS **3770 PINEBROOK CIRCLE, #5**  
 CITY-ST-ZIP **BRADENTON FL**

TITLE **PD** ☒ Delete  
 NAME **ROSS, JAN J.**  
 STREET ADDRESS **423 63RD STREET NW**  
 CITY-ST-ZIP **BRADENTON FL**

TITLE **VD** ☐ Delete  
 NAME **KESTEN, MURRAY**  
 STREET ADDRESS **5601 MANATEE AVE. W.**  
 CITY-ST-ZIP **BRADENTON FL**

TITLE **ED** ☐ Delete  
 NAME **CAMPBELL, ELLEN J.**  
 STREET ADDRESS **6505 44TH AVE EAST**  
 CITY-ST-ZIP **BRADENTON FL 34203**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition  
 NAME **Murray Kesten**  
 STREET ADDRESS **6703 Arbor Oaks Drive**  
 CITY-ST-ZIP **Bradenton, FL 34209**

TITLE **VD** ☐ Change ☒ Addition  
 NAME **Robert Beck**  
 STREET ADDRESS **8308 12 Avenue Drive Northwest**  
 CITY-ST-ZIP **Bradenton, FL 34209**

TITLE **TD** ☐ Change ☒ Addition  
 NAME **Mike Craig**  
 STREET ADDRESS **9238 19 Drive Northwest**  
 CITY-ST-ZIP **Bradenton, FL 34209**

TITLE **SD** ☐ Change ☒ Addition  
 NAME **- Dan Nolan**  
 STREET ADDRESS **1307 70 Street Northwest**  
 CITY-ST-ZIP **Bradenton, FL 34209**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

*Ellen J. Campbell*  
**RECEIVED**

CR2E037 (10/00)

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