#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000001463

Entity Name: MANATEE HIGH SCHOOL ALUMNI ASSOCIATION, INC.

FILED Feb 02, 2024 Secretary of State 0489634875CC

## **Current Principal Place of Business:**

10224 46TH AVENUE WEST BRADENTON, FL 34210

## **Current Mailing Address:**

P. O. BOX 15103

BRADENTON, FL 34280 US

FEI Number: 46-4194721 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

VITA, JOHN R 10224 46TH AVENUE WEST BRADENTON, FL 32410 US

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: JOHN R. VITA 02/02/2024

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	PRESIDENT	Title	SECRETARY
Name	VITA, JOHN R.	Name	BOONE, LINDA
Address	P. O. BOX 15103	Address	P. O. BOX 15103

City-State-Zip: BRADENTON FL 34280 City-State-Zip: BRADENTON FL 34280

Title TREASURER Title VP

NameKELLER, CAROLYN G.NameMORRIS, RICHARDAddressP. O. BOX 15103AddressP. O. BOX 15103

City-State-Zip: BRADENTON FL 34280 City-State-Zip: BRADENTON FL 34280

Title DIRECTOR Title DIRECTOR

NameLATESSA, ROBERTNameSUMMER, BOWENAddressP. O. BOX 15103AddressP. O. BOX 15103

City-State-Zip: BRADENTON FL 34280 City-State-Zip: BRADENTON FL 34280

TitleDIRECTORTitleDIRECTORNameSIFRIT, THOMASNameLEWIS, LEEAddressP. O. BOX 15103AddressP. O. BOX 15103

City-State-Zip: BRADENTON FL 34280 City-State-Zip: BRADENTON FL 34280

# Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CAROLYN KELLER TREASURER 02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name RADER, THERESA Address P. O. BOX 15103

City-State-Zip: BRADENTON FL 34280