2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 07, 2001 8:00 am Secretary of State **DOCUMENT # 354658** 1. Entity Name MANATEE M & G, INC. 02-07-2001 90191 050 ***150.00 Principal Place of Business Mailing Address C/O JOHN C. MANSON, ATTY, C/O JOHN C. MANSON, ATTY. 406 13TH ST. W. 406 13TH ST. W. BRADENTON FL 34205 **BRADENTON FL 34205** 3. Mailing Address athere W DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1308890 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MANSON, JOHN C. Street Address (P.O. Box Number is Not Acceptable) 2716 RIVERVIEW BLVD. W. 406 13TH ST. W. BRADENTON FL 34205 Zip Code FL 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MANSON, JOHN C NAME NAME STREET ADDRESS 2716 RIVERVIEW BLVD. W. STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition **GUELHE, JEFFREY** NAME STREET ADDRESS 406 13TH ST W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-71P Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

changed, or on an attachmen with an address, with all other like empowered. **SIGNATURE:**

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