

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 372534

1. Entity Name
MANATEE CABINETS, INC.



Principal Place of Business

**8700 CORTEZ ROAD WEST
BRADENTON, FL 34210**

Mailing Address

**8700 CORTEZ ROAD WEST
BRADENTON, FL 34210**

FILED
Jul 17, 2008 08:00 AM
Secretary of State

DO NOT WRITE IN THIS SPACE

(372534=====P)

07082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1315841	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**HYDE, MARCUS L
2410 RIVERSIDE DRIVE EAST
BRADENTON, FL 34208**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

U000000955486
~~07/17/08-80007-003 150.00~~
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HYDE, MARCUS L
STREET ADDRESS	2410 RIVERSIDE DRIVE EAST
CITY-ST-ZIP	BRADENTON, FL 34208

TITLE	VTS
NAME	HYDE, DIANE E
STREET ADDRESS	2410 RIVERSIDE DR E
CITY-ST-ZIP	BRADENTON, FL 34208

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marcus L. Hyde **MARCUS L. HYDE** 7/10/08 991-792-8656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #