## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 703310

1. Entity Name



## **FILED** Jan 14, 2003 8:00 am Secretary of State

LIVANIA	IS CLUB OF BRADENTON-DES	SOTO, FLORIDA, INC.	:.   (				9 044 ****6	
26 T. BAYS 603 63RD /	Place of Business SHORE WINDMILL VILLAGE AVENUE WEST N FL 34207	Mailing Address 222 OLD MAIN ST APT 102 BRADENTON FL 34205 US		WE.		•	)   <b>  </b>	<b>818</b> ]] <b>\$18</b> 11 1881
2. Principal Place of Business  Suite, Apt. #, etc.  City & State		3. Mailing Address  Suite, Apt. #, etc.						
					CHECK HERE IF MAKING CHANGES			
		City & State		——————————————————————————————————————			Applied For	
Zip	Country	Zip	Count	ry	5. Certificate of Statu	us Desired	\$8.75 A	
	6. Name and Address of Curren	t Registered Agent			7. Name and Addre	no of New Desiletin	Fee Requi	red
				Name	7. Name and Addres	ss of New Hegister	red Agent	
603 63 BAYSH	itt, donald H. RF Ave. W. Iore Windmill Village		-	Street Address	(P.O. Box Number is Not	Acceptable)		
BKADE	NTON FL 34207		- (	City	<del></del>		Zip Co	do
O Thombo	eve named entity submits this statement for gations of registered agent.					ř	-	
			TE: Hegislered Ag	ent signature required	d when reinstating)	DAT	re .	
10.	FILE NOW: FEE IS \$61.25  OFFICERS AND DIE	9. Election Ca Trust Fund (	ampaign Finar Contribution.	ncing	\$5.00 May Be Added to Fees	Make Cho Florida Dep	eck Payable partment of	State
<b>10.</b>	OFFICERS AND DII	9. Election Ca Trust Fund (	ampaign Final Contribution.	ncing	\$5.00 May Be	Make Cho Florida Dep	eck Payable partment of	State
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIF DELPLATO, RACHEL 233 47TH ST. W. BRADENTON FL 34209	9. Election Ca Trust Fund (	ampaign Final Contribution.  11. TITLE NAME STREET AL	DORESS ZIP	\$5.00 May Be Added to Fees	Make Cho Florida Dep	eck Payable partment of DIRECTORS II	State N 10 Addition
TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME	DELPLATO, RACHEL 233 47TH ST. W. BRADENTON FL 34209  MCRAE, LESLIE	9. Election Ca Trust Fund ( RECTORS	ampaign Final Contribution.  11. TITLE NAME STREET AL CITY-ST-	DORESS DORESS	\$5.00 May Be Added to Fees	Make Cho Florida Dep	eck Payable partment of	State N 10 Addition
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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: