


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2005 8:00 am**  
**Secretary of State**

03-22-2005 90149 001 \*\*\*122.50

<b>DOCUMENT # 704590</b> 1. Entity Name <b>MANATEE CHAMBER OF COMMERCE, INCORPORATED</b>					
Principal Place of Business <b>222 - 10TH STREET WEST BRADENTON, FL 34205-8636</b>			Mailing Address <b>222 - 10TH STREET WEST BRADENTON, FL 34205-8636</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-0979413</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BARTZ, ROBERT P 222 10TH ST W BRADENTON, FL 34205</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PS <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARTZ, ROBERT		NAME		
STREET ADDRESS	222 10TH ST W		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL <u>34205</u>		CITY-ST-ZIP	<u>34205</u>	
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BECK, ROBERT		NAME		
STREET ADDRESS	8433 ENTERPRISE CIRCLE, STE 110		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34202		CITY-ST-ZIP		
TITLE	<del>DVC</del> <input type="checkbox"/> Delete		TITLE	<del>D</del> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DUPONT, RIP		NAME		
STREET ADDRESS	5817 MANDER AVE W		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	<del>D</del> <input type="checkbox"/> Delete		TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NEFF, JERRY		NAME		
STREET ADDRESS	4562 CORTEZ RD WEST		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
TITLE	<del>T</del> <input type="checkbox"/> Delete		TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DANAHY, TOM		NAME		
STREET ADDRESS	6215 LORRAINE RD		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34202		CITY-ST-ZIP		
TITLE	<del>DVC</del> <input type="checkbox"/> Delete		TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PIERRO, RICHARD		NAME		
STREET ADDRESS	5550 26TH STREET WEST #7		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34207		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 line empowered.					
<b>SIGNATURE:</b> <u>Robert P. Bartz</u> <b>3116105 941-748-4842</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					