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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB -9 AM 11:29

DOCUMENT # 712967 (9)

1. Corporation Name

MANATEE COMMUNITY BLOOD CENTER, INC.

Principal Place of Business

Mailing Address

216 MANATEE AVENUE EAST
BRADENTON FL 34208

216 MANATEE AVENUE EAST
BRADENTON FL 34208

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/21/1967

3a. Date of Last Report
02/16/1994

4. FEI Number
59-0774195

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GROSS, RICHARD G
1111 8 AVE W
BRADENTON FL 34205

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GROSS, DICK
STREET ADDRESS 1111 8TH AVENUE WEST
CITY-ST-ZIP BRADENTON FL

1.1 TITLE ☐ Change ☐ Addition

TITLE D
NAME PARENT, B. R. JR.
STREET ADDRESS 1215 MANATEE AVE W
CITY-ST-ZIP BRADENTON FL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE TD
NAME STEPHENS, STAN
STREET ADDRESS 5515 21 AVE W S-D
CITY-ST-ZIP BRADENTON FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE SD
NAME CREIGHTON, BEDDOW
STREET ADDRESS 907 5TH ST W
CITY-ST-ZIP PALMETTO FL

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE VD
NAME ELTON, SANFORD M
STREET ADDRESS 530 5 ST E
CITY-ST-ZIP BRADENTON FL

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE D
NAME CLARKE, TIM
STREET ADDRESS 400 SARASOTA QUAY
CITY-ST-ZIP SARASOTA FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 employed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 unchanged, or on an amendment with an address.

SIGNATURE

Richard G. Gross - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone