## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT#713492** 

FILED Dec 11, 2008 Secretary of State

Entity Name: MANATEE COUNTY SHERIFF'S MOUNTED POSSE AUXILIARY, INC.

	rincipal Place of Business:	New Principal Place of Business:
2409 LENA BRADENT	A RD. FON, FL 34202 US	
Current M	ailing Address:	New Mailing Address:
2409 LENA BRADENT	A RD. ON, FL 34202 US	3208 21ST AVE WEST BRADENTON, FL 34205 US
In accordan	: 59-1910864 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did n I Address of Current Registered Agent:	FEI Number Not Applicable ( ) Certificate of Status Desired ( ) ot receive the prior notice.  Name and Address of New Registered Agent:
MANATÉE	HARLES B. EAVE ON, FL 33505 US	STEUBE, BRAD W. MANATEE AVE BRADENTON, FL 33505 US
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE: STEUBE, BRAD W.	12/11/2008
	Electronic Signature of Registered Ag	ent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	S () Delete BARETT, PATRICIA 5119 18TH ST. W BRADENTON, FL 34207	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SANDRIDGE, RACHEL 3208 21ST AVE WEST BRADENTON, FL 34205	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	TD () Delete SANDRIDGE, DANA 3208 21ST AVE W BRADENTON, FL 34205	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title:	P () Delete VAN HOOSE, PAM 1510 67TH CT E	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Name: Address: City-St-Zip:	BRADENTON, FL 34208	
Address:	VP ( ) Delete YOW, BILL 5211 WINGATE RD MYAKKA CITY, FL 34251	Title: D (X) Change ( ) Addition Name: PETERSON, JOAN Address: 27964 GOPHER HILL RD City-St-Zip: MYAKKA CITY, FL 34251

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANA SANDRIDGE TD 12/11/2008