

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 714283 (9)

1. Corporation Name

MARINE INDUSTRIES ASSOCIATION OF MANATEE & SARAS
OTA COUNTIES, INC.



Principal Place of Business

Mailing Address

P.O. BOX 5552
BRADENTON FL 34281
US

P.O. BOX 5552
BRADENTON FL 34281
US

3. Date Incorporated or Qualified
03/20/1968

3a. Date of Last Report
06/16/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-7033568

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITTAKER, THOMAS E.
1521 S. TAMiami TRAIL, SUITE 303
VENICE FL 34292

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE P
NAME GUTSHELL, LOU
STREET ADDRESS 1061 KEN THOMPSON PARKWAY
CITY-ST-ZIP SARASOTA FL ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME WHIPP, EUGENE
STREET ADDRESS 1601 KEN THOMPSON PARKWAY
CITY-ST-ZIP SARASOTA FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME HOUSLEY, WILLIAM
STREET ADDRESS 3060 PLACIDA RD.
CITY-ST-ZIP ENGLEWOOD FL ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☒ Addition

S
Bill Mudgett
1651 Whitfield Ave
Bradenton, FL

TITLE T
NAME WHITTAKER, THOMAS E.
STREET ADDRESS 1521 S. TAMiami TRAIL SUITE 303
CITY-ST-ZIP VENICE FL ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME PARRISH, BEN
STREET ADDRESS 6040 GULF OF MEXICO DRIVE
CITY-ST-ZIP LONGBOAT KEY FL ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MUDGETT, BILL
STREET ADDRESS 1651 WHITFIELD AVENUE
CITY-ST-ZIP BRADENTON FL ☒ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☒ Addition

D
Terry Lynch
7090 Placida Road
Cape Haze, FL

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 119.07(3)(k), 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Thomas E. Whittaker Thomas E. Whittaker

2/2/96 941-493-5299

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (12/95)