## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT #732116**

1. Entity Name



## **FILED** Jan 16, 2007 8:00 am Secretary of State

MANÁSOTA LEAGUE OF CITIES, INC.			01-16-2	2007 90185 026	5 ****61.2	25	
Principal Place of Business CITY HALL 1565 1ST ST ROOM 110 SARASOTA, FL 34236 US  Mailing Address CITY HALL, P.O. BOX 1058 ROOM 110 SARASOTA, FL 34230		) (110/14 (1880 ) (164 HEA) (164	TI TIDER RITE ALDIT DIDER RIVEL	I AISII AISII AISI	ANTA ON FEET		
Principal Place of Business - No P.O. Box #     Mailing Address							
Suite, Apt. #, etc.	Suite, Apt. #, etc.		01092007 Chg-NP	CR2E037	7 (12/06)		
City & State	City & State		4. FEI Number 65-0281922	Applied For Not Applicabl			
Zip Country	Zip	Country	5. Certificate of Status De		8.75 Add ee Required		
6. Name and Address of Current	Registered Agent	Ness	7. Name and Address of	New Registered A	gent		
ROBINSON, BILLY E		Name	(BO B 4)				
CITY HALL, 1565 FIRST STREET ROOM 110		Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
SARASOTA, FL 34236		City		FL	Zip Code	<del></del>	
The above named entity submits this statement for the obligations of registered agent.	or the purpose of changing its re	egistered office or regis	stered agent, or both, in the Sta		amiliar with,	and accept	
tio conganoro di registrico aggini.							
SIGNATURE Signature, typed or printed name of registored agent	and title if applicable. {NOTE:	Registered Agent signature requ	ired when reinstating)	DATE	<del>.</del>		
Filing Fee is \$61.25  Due by May 1, 2007  9. Election Campaign Trust Fund Contribu		· · · -	\$5.00 May Be Added to Fees	Make check Florida Departs			
10. OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGES TO	OFFICERS AND DIR	ECTORS IN	10	
TITLE P							
NAME GROSS, BARBARA STREET ADDRESS 5650 N PORT BLVD NORTH PORT, FL 34287	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
STREET ADDRESS 5650 N PORT BLVD	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE VP NAME STREET ADDRESS 58	hnenberger, Rich Ol Marina Dr lmes Beach, FL 34	<del> </del>	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34287 TITLE NAME STREET ADDRESS 5650 N PORT BLVD NORTH PORT, FL 34287 VP BONNENBERGER, RICH 5801 MARINA DR	☐ Delete  7  K☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS P.	01 Marina Dr <u>lmes Beach, FL 34</u> stle, Larry 0. Box 1209	4217			
STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34287  TITLE NAME STREET ADDRESS ST PHILLIPS, LISA MARIE STREET ADDRESS ST STREET ADDRESS ST S	☐ Delete  7  K☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS P.	01 Marina Dr <u>lmes Beach, FL 3</u> 4 stle, Larry	<u>4217</u> 0		☐ Addition	
STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34287  TITLE NAME STREET ADDRESS CITY-ST-ZIP ST PHILLIPS, LISA MARIE 107 GULF DR N BRADENTON BEACH, FL 3421  TITLE NAME STREET ADDRESS CITY-ST-ZIP BRADENTON BEACH, FL 3421  TITLE NAME STREET ADDRESS ST S	. □ Delete 7	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE ST NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP PA	01 Marina Dr <u>lmes Beach, FL 34</u> stle, Larry 0. Box 1209	4217		Addition  Addition	

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:

Larry Bustle

Date

(941) 723-4570