

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733921

FILED  
Apr 19, 2006  
Secretary of State

**Entity Name:** FRATERNAL ORDER OF POLICE MANATEE LODGE #70, INC.

**Current Principal Place of Business:**

1825 11 ST. WEST  
BRADENTON, FL 34205 US

**New Principal Place of Business:**

**Current Mailing Address:**

1825 11 ST. WEST  
BRADENTON, FL 34205 US

**New Mailing Address:**

**FEI Number:** 59-1609949

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COVELLIA, MICHAEL PA  
6023 26TH ST WEST  
135  
BRADENTON, FL 34207 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DODD, SAMUEL K  
Address: 1050 134TH ST N.E.  
City-St-Zip: BRADENTON, FL 34212

Title: VP ( ) Delete  
Name: WORLEY, TERRY  
Address: 5215 12TH AVE DR. WEST  
City-St-Zip: BRADENTON, FL 34209

Title: D ( ) Delete  
Name: TOMBLIN, SHERYAL  
Address: 158 ALPINE CT  
City-St-Zip: SARASOTA, FL 34208

Title: D ( ) Delete  
Name: LEONARD, GENE  
Address: 2924 STARMOUNT DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: ANDREWS, JOHN  
Address: 1327 MAGELLAN DR.  
City-St-Zip: SARASOTA, FL 34243

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMUEL KENT DODD

P

04/19/2006

Electronic Signature of Signing Officer or Director

Date