

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745850

FILED  
Jan 24, 2012  
Secretary of State

**Entity Name:** MANASOTA GENEALOGICAL SOCIETY, INC.

**Current Principal Place of Business:**

THE MANATEE CENTRAL LIBRARY  
LIBRARY-AUDITORIUM  
BRADENTON, FL 34205

**New Principal Place of Business:**

THE MANATEE CENTRAL LIBRARY  
LIBRARY-AUDITORIUM  
BRADENTON, FL 34205

**Current Mailing Address:**

P. O. BOX 1194  
BRADENTON, FL 34206

**New Mailing Address:**

FEI Number: 59-1911525      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COLKET, DOREEN P  
808 3RD AV WEST  
304  
BRADENTON, FL 34205 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  
Name: REGER, JIM  
Address: 6249 TRIPLE TAIL CT  
City-St-Zip: BRADENTON, FL 34202

Title: VP  
Name: MORRIS, JEAN O COLKET  
Address: 174 OSPREY CIRCLE  
City-St-Zip: ELLENTON, FL 34222

Title: S  
Name: LEBER, LINDA  
Address: 15421 29TH LANE E  
City-St-Zip: PARRISH, FL 34209

Title: D  
Name: YOUNG, RUBY  
Address: 1821 10TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 342055310

Title: TREA  
Name: COLKET, DOREEN P  
Address: 808 3RD AVENUE WEST #304  
City-St-Zip: BRADENTON, FL 34205

I hereby 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 all other like empowered.

SIGNATURE: DOREEN P COLKET

TREA

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date