


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90078 019 ****61.25

DOCUMENT # 751897 1. Entity Name MANATEE RIVER GARDEN CLUB, INC.					
Principal Place of Business MANATEE RIVER GARDEN CLUB 3120 FIRST AVE. W BRADENTON, FL 34205-2005 US			Mailing Address PO BOX 14662 BRADENTON, FL 34280 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-6135578	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HAMLIN, JANICE 805 HILLCREST DR. BRADENTON, FL 34209				Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAWSON, GLENDA		NAME		
STREET ADDRESS	4103 11TH ST. COURT WEST #101		STREET ADDRESS		
CITY-ST-ZIP	PALMETTO, FL 34221		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARRINGTON, ANN		NAME	VP LORI RICHIE	
STREET ADDRESS	7310 11TH AVENUE WEST		STREET ADDRESS	1212 75th ST W	
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	CSD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CLARK, VIRGINIA		NAME	CSD ANN BECKLEY	
STREET ADDRESS	3011 14TH AVE W		STREET ADDRESS	2207 WELLESLEY DR N	
CITY-ST-ZIP	BRADENTON, FL 34205		CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	RDS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TALLEPRAGADA, SHANTA		NAME		
STREET ADDRESS	4511 SHARK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34208		CITY-ST-ZIP		
TITLE	TDD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HAMLIN, JANICE		NAME		
STREET ADDRESS	805 HILLCREST DR.		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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: *Janice Hamlin* **Janice Hamlin** 1-27-05 941-745-5920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #