

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 27 PM 4: 00

DOCUMENT # **756677** (1)
1. Corporation Name
GOODWILL INDUSTRIES-MANASOTA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
7501 BRADENTON ROAD SARASOTA FL 34243 US

3. Date Incorporated or Qualified **03/09/1981** 3a. Date of Last Report **03/18/1994**
4. FEI Number **59-2074391** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**ROBERTS, DONALD L
7501 BRADENTON ROAD
SARASOTA FL 34243**

10. Name and Address of New Registered Agent
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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renovating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	ROBERTS, DONALD L.
STREET ADDRESS	7501 BRADENTON RD
CITY-ST-ZIP	SARASOTA FL
TITLE	V
NAME	GAMMONLEY, WILLIAM
STREET ADDRESS	7501 BRADENTON RD
CITY-ST-ZIP	SARASOTA FL
TITLE	D
NAME	BASEMAN, STEPHEN J.
STREET ADDRESS	457 E. ROYAL FLAMINGO DRIVE
CITY-ST-ZIP	SARASOTA FL
TITLE	D
NAME	FARRANCE, GEORGE
STREET ADDRESS	918 82ND STREET NW
CITY-ST-ZIP	BRADENTON FL
TITLE	D
NAME	WALKER, DON
STREET ADDRESS	4050 MIDDLE AVENUE
CITY-ST-ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D Cook Sr., Marlow W.
4.3 STREET ADDRESS	444 Washington Drive North
4.4 CITY-ST-ZIP	Sarasota, FL 34236
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D Houser, C. Gordon
5.3 STREET ADDRESS	1651 Whitfield Ave.
5.4 CITY-ST-ZIP	Sarasota, FL 34243
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	V HOECK, R. LAWE
6.3 STREET ADDRESS	7501 BRADENTON RD
6.4 CITY-ST-ZIP	SARASOTA, FL 34243

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 110.07(3)(b), 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: *[Signature]* R. LAWE HOECK 1-11-94 (813) 545-2771
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #