NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 756677

1. Corporation Name

GOODWILL INDUSTRIES-MANASOTA, INC.

Principal Place of Business
7501 BRADENTON ROAD SARASOTA FL 34243
US

Mailing Address

7501 BRADENTON ROAD SARASOTA FL 34243

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90011 018 ****70.00



													_	
2. Principal Place of Business				2a. Mailing Address					Date Incorporated or Qualifed					
21			26						03/09/198	51				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				4	FO 00740	04		-		ed For
22				27					59-20743	91		<u> </u>		Applicable
City & State				City & State					. Certifcate of	Status Desire	ed 🔀		D Adı Regu	ditional iired
23				Zip Country					- Election Cod	engian Finan	oina		00 м	
Zip					20	30			5. Election Car Trust Fund (-			led to	- [
24		25 Address of Current	stered Ament							lew Registered				
Name and Address of Current Registered Agent							Name							
DODESTA DOLLADA							.			L (- NI-4 A -				
ROBERTS, DONALD L 7501 BRADENTON ROAD						82	Street	Address ((P.O. Box Num	Der is NOLAC	ceptable)			
						83								
SARASUI	A FL 34243	i				84					•	···		
							City				FL	85 2	Zip Co	de .
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directions of the corporation of the state of Florida.											or the purpose of	changing	its re	gistered
office or re	egistered age	ent, or both, in the State of	t Florid	da. Such chan	ge was auth	onzea by '	ine como	oration's t	board of director	rs. I hereby	accept the appo	intment a	s regis	tered
agent. I ar	m familiar wit	h, and accept the obligation	ons or	, Section 617.	JOUS, FIORIUS	s Statutes.								į
SIGNATURE	Clanature, haned	or printed game of recistered agent	and title	if applicable	(NOTE: Re	aistered Agen	t signature r	required wher	n reinstating)		DATE			
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Res OFFICERS AND DIRECTORS									HANGES TO	O OFFICERS A	ND DIREC	CTOR	\$ IN 12
TITLE	P DELETE					1.1 TITLE						Char	nge	☐ Addition
NAME	ROBERTS, DONALD L.					1.2 NAME								1
STREET ADDRESS	7501 BRADENTON RD					1.3 STREET	ADDRESS							
CITY-ST-ZIP	SARASOTA FL					1.4 CITY-\$1	-ZIP							_
TITLE	D DELETE					2.1 TITLE	-					☐ Char	nge	☐ Addition
NAME	WALTERS, CLIFFORD L					2.2 NAME								
STREET ADDRESS	802 11TH ST. W.					2.3 STREET	ADDRESS							
City-st-zip	BRADENTON FL					2. 4 CITY-S	T-ZIP							
TITLE	D XOELETE					3.1 TITLE		PIZ	ECTOR			X Char	ige	Addition
NAME	-					3.2 NAME		Fich	HAZIS A	ANLEY	,	-		
STREET ADDRESS	1800 SECOND AVE					3.3 STREET	ADDRESS	1001	MANAT	EE AVE	5. W.,			Ì
CITY-ST-ZIP	SARASOTA FL					3.4. CITY-S	T-ZIP	BZA	WENTON	(, FL	=. w. 34206			
TITLE						4.1 TITLE						☐ Char	nge	☐ Addition
NAME	MORRIS.	ROBERT				4. 2 NAME								•
STREET ADDRESS	1280 DOLPHIN BAY WAY #201					4.3 STREET	ADDRESS	:						
CITY-ST-ZIP	SIETA KEY					4.4 CITY-ST	-ZIP							
TITLE	٧			_ D	ELETE	5.1 TITLE						Chai	nge	☐ Addition
NAME	ROSINSKY	r, robert				5.2 NAME								
STREET ADDRESS	7501 BRADNTON RD					5.3 STREET	ADDRESS	· [,
CITY-ST-ZIP	SARASOTA	A FL				5.4 CITY-ST	r-21P							
TITLE	٧				ELETE	6.1 TITLE						☐ Char	nge	Addition
NAME	HOECK, R	R LANE				6.2 NAME								ĺ
STREET ADDRESS						6.3 STREET	ADDRESS							Ì
CITY-ST-ZIP	SARASOTA FL					6.4 CITY-ST	T-ZIP							
				eu	115 5 44			- C	** 440.07(0)(0)	Clasida Ctat	utee I further co	-41E - 45-4 4		

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 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 allock 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

94-355-2721