# 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

APPROVED AND FILED

95 MAR -2 PM 3:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 770101 (4)

1. Corporation Name

MANASOTA INDUSTRY COUNCIL, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1903 NORTHGATE BLVD.<br>SARASOTA FL 34234 | 1903 NORTHGATE BLVD.<br>SARASOTA FL 34234<br>US |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/02/1983
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2334811 ☐ Applied For ☐ Not Applicable
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

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

9. Name and Address of Current Registered Agent

KRESS, MARY HELEN
1089 LAUREL WOODS DR
NOKOMIS FL 34275

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 607.1509, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE | •C | 1.1 TITLE | D | ☒ Change ☐ Addition |
| NAME | ROBERTS, ROGER P | 1.2 NAME | | |
| STREET ADDRESS | 10210 CLUB HOUSE DR | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | BRADENTON FL | 1.4 CITY-ST-ZIP | | |
| TITLE | MD | 2.1 TITLE | M | ☒ Change ☐ Addition |
| NAME | KRESS, MARY KAY | 2.2 NAME | Mary Helen Kress | |
| STREET ADDRESS | 1089 LAURL WOODS DR | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | NOKOMIS FL | 2.4 CITY-ST-ZIP | | |
| TITLE | D | 3.1 TITLE | D | ☒ Change ☐ Addition |
| NAME | SPARKS, PEGGY | 3.2 NAME | H. Skeet Surrency | |
| STREET ADDRESS | 7208 41ST CT. E. | 3.3 STREET ADDRESS | 101 S. Washington Blvd. | |
| CITY-ST-ZIP | SARASOTA FL | 3.4 CITY-ST-ZIP | Sarasota, FL 34237 | |
| TITLE | D | 4.1 TITLE | D | ☒ Change ☐ Addition |
| NAME | SURRENCY, H. SKEET | 4.2 NAME | Steven Bradley | |
| STREET ADDRESS | 4050 BENT TREE BLVD | 4.3 STREET ADDRESS | 1950 Landings Blvd., Ste 101 | |
| CITY-ST-ZIP | SARASOTA FL | 4.4 CITY-ST-ZIP | Sarasota, FL 34231 | |
| TITLE | | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | 5.2 NAME | | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | | |
| TITLE | | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | | |

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 119.07(3)(k), 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:** Mary Helen Kress Mary Helen Kress 01-17-95 813/351-0950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0083803