## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS 1996 (3)**DOCUMENT #**  Corporation Name MANATEE EAST CORPORATION Mailing Address Principal Place of Business P.O. BOX 1158 250 2ND STREET, EAST **BRADENTON FL 34206** STE. 48 **BRADENTON FL 34208** 3a. Date of Last Report 3. Date incorporated or Qualified HS 05/01/1995 09/24/1987 Applied For 4. FET Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 300 Riverside Dr. Suite, Apt. #, etc. 65-0074201 26 \$8.75 Additional Suite Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No Florida Statutes 30 29 10. Name and Address of New Registered Agent Current Registered Agent 81 Name is (P.O. Box Number is Not Acceptable) 82 CROGHAN, BERNARD M. 250 2ND STREET, EAST 83 SUITE #3C Zip Code **BRADENTON FL 34208** 85 84 City 11. Pursuant to the provisions of Sections 607.050? 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 charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lamillar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: ative, it plead on promotions a new of registrosystem, but next tall it depoils. more Brashered About services ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Add-hop DELETE 3 3 ft (E TITLE PD 1.2 NAME CROGHAN, BERNARD NAME 300 Riverside Dr. E. 1.3 STREET ADDRESS 250 2ND STREET, EAST #3C STREET ADDRESS Bradenton, FL 34208 1.4 O(TY -\$1 - 2)F **BRADENTON FL 34208** CITY-ST ZIP Addition Change DELETE 2 1 10 LE THILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CITY - ST ZIP CITY - \$1 - ZIP Change ☐ Addition DELETE 3 1 TFLE 3.2 NAME NAME 3.3 STREET ADDRESS STREEL ADDRESS 3.4 CITY - ST - ZIP City-St. 7IP Addition ☐ Change DELETE 4 13114 TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - 71P ☐ Change ☐ Addition DELF16 5 13:TLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHTY - \$1 - ZIP CITY-ST-ZIP ☐ Addition □ Change DELETE 6 1 THE TITLE 6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR

14. Ido 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 logal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my mane appears in Block 12 or Block 13 if changed, or or an attachment with an address

CR2E034 (12/95)