-2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Jul 13, 2005 8:00 am Secretary of State DOCUMENT # K93778 1. Entity Name 07-13-2005 90020 001 \*\*\*150.00 MARK MCMANUS, INC. Principal Place of Business Mailing Address 15821 CHIEF CT. FT. MEYER FL 33912 15821 CHIEF CT. FT. MEYER FL 33912 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0128772 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCMANUS, MARK Street Address (P.O. Box Number is Not Acceptable) 15821 CHIEF CT. FT. MEYER FL 33912 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 Signature, typed or printed name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PST** TITLE ☐ Change Detete ☐ Addition MCMANUS, MARK NAME NAME 15821 CHIEF CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. MYERS FL CITY-ST-ZIP VΡ ☐ Delete Change Addition NAME THURMAN, KELLI NAME STREET ADDRESS 15821 CHIEF COURT STREET ADDRESS FORT MYERS FL 33912 CITY-ST-7/P CITY-ST-7IP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7P

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 607, 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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Thurman Vice tresident 6-30 to

FILED



## ATTACHMENT

July 1, 2005

Florida Department of State **Division of Corporations** P.O. Box 6198 Tallahassee, FL 32314

Re:

Mark McManus, Inc.

Corporate Number: K93778

FEI Number: 65-0128772

Dear Sir or Madam:

Thank you for sending me our replacement 2005 Corporation Annual Report form so that we could file our annual report with the State of Florida. As I stated in my May 25, 2005, letter, we did not receive this renewal form thereby missing the May filing deadline. We received the replacement forms this week.

Enclosed is our completed Annual Report along with our check in the amount of \$150.00.

Thank you again for your assistance in this matter. If you have any questions, please contact me.

Sincerely,

Kelli Thurman

Vice President

KT/pak

Enclosures

