

# 2001 UNIFORM BUSINESS REPORT (UBR)

2/2

**FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**

02-21-2001 90026 023 \*\*\*\*61.25

**DOCUMENT # N00967**

1. Entity Name

**MANATEE-SARASOTA FISH AND GAME ASSOCIATION, INC.**

Principal Place of Business

6508 QUONSAT RD  
BRADENTON FL 34203  
US

Mailing Address

P O BOX 116  
ONECO FL 34264  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BADEN, EARL W., JR.**  
**1101 SIXTH AVE., W.**  
**BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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.

SIGNATURE

*Earl W. Baden Jr.*

*12 Feb 01*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	MEYERS, RICK	
STREET ADDRESS	7411 -18TH AVE NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	PARKER, ROY E	
STREET ADDRESS	7611 9TH AVE NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	TS	<input checked="" type="checkbox"/> Delete
NAME	WANLESS, PATRICIA	
STREET ADDRESS	9929- 22ND ST W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	DV	<input type="checkbox"/> Delete
NAME	ZACHARLAS, JAMES	
STREET ADDRESS	4512 -121ST ST. CT W	
CITY-ST-ZIP	CORTEZ FL 34215	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James Turner	
STREET ADDRESS	115 62nd Street W	
CITY-ST-ZIP	Bradenton FL 34205	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Zacharlas, James	
STREET ADDRESS	4512 121st St Ct W	
CITY-ST-ZIP	Cortez, FL 34215	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert Sweet	
STREET ADDRESS	3203 14th Ave W	
CITY-ST-ZIP	Bradenton FL 34205	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 617, 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:

*James Zacharlas*

*Feb 13, 2001 941-795-5026*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)