


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90187 044 ****61.25

DOCUMENT # N00967 1. Entity Name MANATEE-SARASOTA FISH AND GAME ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 9164 BRADENTON, FL 34206-9164 US			Mailing Address P.O. BOX 9164 BRADENTON, FL 34206-9164 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BADEN, EARL W JR 1101 SIXTH AVE., W. BRADENTON, FL 34205			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PARKER, ROY E		NAME	David Seipol	
STREET ADDRESS	7611 9TH AVE NW		STREET ADDRESS	125 29th Street W	
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP	Bradenton FL 34205	
TITLE	ST <input checked="" type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BELLMAN, ARTHUR		NAME	Denny Smith	
STREET ADDRESS	5320 53RD AVENUE EAST, UNIT 7		STREET ADDRESS	6421 91st Ave E	
CITY-ST-ZIP	BRADENTON, FL 34202		CITY-ST-ZIP	Parrish FL 34299	
TITLE	D <input type="checkbox"/> Delete		TITLE	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZACHARIAS, JAMES		NAME		
STREET ADDRESS	4512 -121ST ST. CT W		STREET ADDRESS		
CITY-ST-ZIP	CORTEZ, FL 34215		CITY-ST-ZIP		
TITLE	P <input checked="" type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PARKER, ARRON		NAME	Earl W Baden	
STREET ADDRESS	7607 9TH AVE. NW		STREET ADDRESS	1210 99th St NW	
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP	Bradenton FL 34209	
TITLE	D <input type="checkbox"/> Delete		TITLE		
NAME	PRATT, KEITH		NAME		
STREET ADDRESS	5718 21ST AVE W.		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34209		CITY-ST-ZIP		
TITLE	VP <input type="checkbox"/> Delete		TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WALLACE, DAN		NAME		
STREET ADDRESS	726 11TH AVE W.		STREET ADDRESS		
CITY-ST-ZIP	PALMETTO, FL 34221		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Dan Wallace</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
				<small>Date Daytime Phone #</small>	