

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004512

FILED
Jun 17, 2005
Secretary of State

Entity Name: HARLEY OWNERS GROUP OF MANATEE COUNTY, FLORIDA, INC.

Current Principal Place of Business:

330 CATTLEMEN RD.
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

330 CATTLEMEN RD.
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1157310 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOGREVE, BRADLEY W ESQ
1734 MAIN STREET
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COOD () Delete
Name: ANTONELLI, TERRI
Address: 330 CATTLEMEN RD
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: ROGERS, ROB
Address: 4508 - 30TH ST CT E
City-St-Zip: BRADENTON, FL 34203

Title: SD () Delete
Name: ROSSITER, ROBIN
Address: 1990 - 1ST STREET W
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI ANTONELLI

COOD

06/17/2005

Electronic Signature of Signing Officer or Director

Date