

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90064 008 ****61.25

DOCUMENT # N01448

1. Entity Name

MANATEE COUNTY INDEPENDENT INSURANCE AGENTS ASSO
CIATION, INC.

Principal Place of Business

Mailing Address

~~7612 18TH AVE NW~~
~~BRADENTON FL~~

7612 18TH AVE NW
BRADENTON FL

2. Principal Place of Business

410 43rd ST.W., Suite J
Suite, Apt. #, etc.

3. Mailing Address

410 43rd ST.W.
Suite, Apt. #, etc.
Suite J

City & State

Bradenton FL

City & State

Bradenton FL

Zip

Country

34209 Manatee

Zip

Country

34209 USA

4. FEI Number

59-2392891

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEARS, WILLIAM G.
7612 18TH AVE NW
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name Phillip B Baker

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

410 43rd ST.W. Suite J

City

Bradenton

FL

Zip Code

34209

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

Phillip B Baker

Phillip B. Baker Treasurer 2/12/2002

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 NAME STREET ADDRESS CITY-ST-ZIP	D REGAN, RONALD 5117 26TH ST WEST BRADENTON FL 34207	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEARS, WILLIAM 409 30TH ST W BRADENTON FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERMAN, ROBERT R. 114 30TH ST., W. BRADENTON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VREEMAN, GARY 1429 60TH AVE W BRADENTON FL 34207	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERT WENTZALL 1400 8TH AVE. DR. W. BRADENTON FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'BRIAN, CHRISTOPHER 1812 MANATEE AVE WEST BRADENTON FL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Phillip B Baker 410 43rd ST.W., Suite J Bradenton, FL 34209 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Marty Hix 2110 Manatee Ave W Bradenton, FL 34205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Dan Johnson 1812 Manatee Ave W Bradenton, FL 34205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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:

Phillip B Baker Phillip B Baker Treasurer 2/12/2002 941 745 8300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)