

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01946

1. Entity Name

MANASOTA DISTRICT COUNCIL, ST. VINCENT DE PAUL S
OCIETY, INC.

Principal Place of Business

Mailing Address

512 S ORANGE AVE
SARASOTA FL 34236
US

6321 16TH AVE DRIVE WEST
BRADENTON FL 34209
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

7305 S. SERENOA DR

City & State

City & State

SARASOTA FL

Zip

Country

Zip

Country

34231

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MAGRATH, SOPHIE
6321 16TH AVE DRIVE WEST
BRADENTON FL 34209

Name

GERVAIS, DARWIN

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

7305 S. SERENOA DRIVE

City

SARASOTA

FL

Zip Code

34231

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

Darwin Gervais

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

(NOTE: Registered Agent signature required when reinstating)

4/17/02

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

11. PRESIDENT CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MAGRATH, SOPHIE ☐ Delete
STREET ADDRESS 6321 16TH AVE DRIVE WEST
CITY-ST-ZIP BRADENTON FL 34209

TITLE PRESIDENT
NAME GERVASIS, DARWIN ☒ Change ☐ Addition
STREET ADDRESS 7305 S SERENOA DR
CITY-ST-ZIP SARASOTA FL 34231

TITLE VD
NAME GERVASIS, DARWIN ☒ Delete
STREET ADDRESS 7305 S SERENOA DRIVE
CITY-ST-ZIP SARASOTA FL 34241

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME MCCOY, VIRGINIA ☐ Delete
STREET ADDRESS 317 SPRINGDALE DRIVE
CITY-ST-ZIP BRADENTON FL 34210

TITLE SECRETARY
NAME CORY, PORTIA ☒ Change ☐ Addition
STREET ADDRESS 3480 IRONWOOD LN #106
CITY-ST-ZIP BRADENTON FL 34209

TITLE TD
NAME SHEA, FRANK ☐ Delete
STREET ADDRESS 64 HARBOR OAKS DR
CITY-ST-ZIP SARASOTA FL 34232

TITLE TREASURER
NAME HOWARD FRANCIS ☒ Change ☐ Addition
STREET ADDRESS 7565 BILTMORE DR
CITY-ST-ZIP SARASOTA FL 34231

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: X

SIGNATURE REQUIRED DARWIN GERVASIS, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-02



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)