

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004052

FILED
Apr 28, 2009
Secretary of State

Entity Name: MANATEE TECHNICAL INSTITUTE FOUNDATION, INC.

Current Principal Place of Business:

5603 34 ST W
BRADENTON, FL 342103509

New Principal Place of Business:

Current Mailing Address:

POB 14820
BRADENTON, FL 34280

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRY, PERRY B ED.D
5603 34 ST W
BRADENTON, FL 342103509 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: D () Delete
Name: CONARD, RICHARD T
Address: 1707 71 STREET NW
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: ZIEMNECKI, JOHN
Address: 4301 32 STREET W.
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: BERRY, PETER B
Address: 5603 34TH STREET WEST
City-St-Zip: BRADENTON, FL 342103509

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 exemption stated 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 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: RICHARD T. CONARD

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date