

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 01, 2004
Secretary of State**

DOCUMENT# N02000006679

Entity Name: MANATEE COUNTY CITIZEN ACTION ASSOCIATION, INC.

Current Principal Place of Business:

12700 UPPER MANATEE RIVER RD.
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

12700 UPPER MANATEE RIVER RD.
BRADENTON, FL 34212

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:

HASTINGS, MARIE
1804 FORT HAMER RD.
PARRISH, FL 34219 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: PD () Delete
Name: MYERS, RON
Address: 10706 WINDING STREAM WAY
City-St-Zip: BRADENTON, FL 34212

Title: VD () Delete
Name: CIEMNIECKI, KAREN
Address: 12700 UPPER MANATEE RIVER RD.
City-St-Zip: BRADENTON, FL 34212

Title: SD () Delete
Name: MCFADDEN, DONALD
Address: 607 MISTY POND CT.
City-St-Zip: BRADENTON, FL 34212

Title: TD () Delete
Name: FISCHER, FREDERICK J
Address: 11719 WINDING WOODS WAY
City-St-Zip: BRADENTON, FL 34202

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:

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: KAREN CIEMNIECKI

VD

05/01/2004

Electronic Signature of Signing Officer or Director

_____ Date