

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90023 023 ****61.25

DOCUMENT # N02000007247

1. Entity Name
MANATEE YOUNG MARINES OF CITRUS COUNTY, INC.



Principal Place of Business
**5170 E TANGELO LANE
INVERNESS, FL 34453**

Mailing Address
**5170 E TANGELO LANE
INVERNESS, FL 34453**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082006

Chg-NP

CR2E037 (11/05)

4. FEI Number
38-2346425

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAMS, KIMBERLY
5170 E TANGELO LANE
INVERNESS, FL 34453**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kimberly A. Williams

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SIMERMAN, JOHN ☒ Delete
STREET ADDRESS 22 TRUMAN BLVD
CITY-ST-ZIP BEVERLY HILLS, FL 34465

TITLE PD PD ☒ Change ☒ Addition
NAME Jimmie Smith
STREET ADDRESS 6205 E. Willow
CITY-ST-ZIP Inverness, FL 34452

TITLE VPD
NAME WILLIAMS, KIMBERLY ☐ Delete
STREET ADDRESS 5170 E TANGELO LANE
CITY-ST-ZIP INVERNESS, FL 34453

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ASD
NAME MIMNAGH, SHERRI ☐ Delete
STREET ADDRESS 9 W MURRAY STREET
CITY-ST-ZIP BEVERLY HILLS, FL 34465

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME HUGGETT, BONNIE ☐ Delete
STREET ADDRESS 480 E KNIGHTSBRIDGE PLACE
CITY-ST-ZIP LECANTO, FL 34461

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE M
NAME SMITH, JIMMIE ☒ Delete
STREET ADDRESS 1157 E WINNETKA
CITY-ST-ZIP HERNANDO, FL 34442

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE M
NAME MITCHELL, ANGELA ☒ Delete
STREET ADDRESS 1521 DRUID ROAD
CITY-ST-ZIP INVERNESS, FL 34452

TITLE M
NAME Angelamitchell ☒ Change ☒ Addition
STREET ADDRESS 413 Poplar
CITY-ST-ZIP Inverness, FL 34452

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

Kimberly A. Williams Kimberly A. Williams 1/21/06 344-0784