2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N03000005828

1. Enary Name

CITY-ST-ZIP

DAVA MANATEE COUNTY UNIT 18, INC.

					_		1				
Principal Place of Business Mailir				Address			∄ 4				
BRANDENTON FL 34203 LOT				3 53RD AVE. E D71 NDENTON FL 34203							
2. Principal Place of Business - No P.O. Box # 3. Mai				siling Address			_		i)	II BIŞAN LANKO ILOMA K	AHAHI OI KODI
Suite, Apt. #. etc.			Suite	Suite, Apt. #, etc.			1st MOORE CR2E037 (10/07)				
City & State			City & State				4. FEI Number	NO-T APPLICABLE Applied For No: Applicable			
Zip Country			Zip	Country			5. Certificate of S	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Regis				ed Agent			7. Name and Address of New Registered Agent				
						Name					
REDMOND,-SHIRLEY 6633 53ND AVE, E LOT D71				Street Addre			(P.O. Box Number is	Not Acceptab	le)		
BRADENTON FL 34203											
•					City				Fl	Zip Cod	ie
	e named entity tions of registe	submits this statement to red agent.	or the purpos	se of changing its	registered office	or registe:	red agent, or both, in	n the State of F	lorida. I am	familiar with	, and accept
SIGNATURE	Signature, typed o	r primari cappe of registered agent	and are il applic	as-o. (NOT	Er Registered Agent sign	nature receised	d when renstating)		CATE		
		FEE IS \$61.25 May 1, 2008			mpaign Financing Contribution.	· 🗆	\$5.00 May Be Added to Fees			k Payable rtment of	
10.		OFFICERS AND DI	RECTORS		11.		ADDITIONS/CHANG	ES TO OFFICI	ERS AND D	IRECTORS I	√ 10
TITLE NAME STREET ADDRESS CITY - ST- ZIP	1	SHIRLEY AVE. E., LOT D71 ON FL 34203		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5				☐ Change	☐ Addition
THILE HAME STREET ADDRESS CITY-ST-ZIP	DC POWELL, PI P O BOX 10 BRADENTO	0882		Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC 50	SAN MC SCUAYA CHOENTO	-CORM) CK - -	Change	Γ΄, Addition
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TITLE NAME STREET ADDRESS		The state of the s		Delete	TITLE NAME SYREET ADORESS		· ·	:		☐ Change	Addition

FILED

Feb 28, 2008 8:00 am Secretary of State

02-28-2008 90014 034 ****70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 it 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: 5HIRLEY RED mond Sheet Ley Rodmond 2/12/08 9HI-751-6757

CiTY-ST-ZiP