

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003175

FILED  
Jul 13, 2008  
Secretary of State

Entity Name: NORTH MANATEE STORM, INC.

## Current Principal Place of Business:

6312 US HIGHWAY 301 N, 247  
ELLENTON, FL 34222

## New Principal Place of Business:

## Current Mailing Address:

6312 US HIGHWAY 301 N, 247  
ELLENTON, FL 34222

## New Mailing Address:

FEI Number: 20-0936403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

WIDNER, KATHY L  
3808 CAPE VISTA DRIVE  
BRADENTON, FL 34209      US

## Name and Address of New Registered Agent:

OSBORNE, KEVIN M  
5010 HEMINGFORD CT  
PALMETTO, FL 34221      US

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: KEVIN M. OSBORNE

07/13/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP      ( ) Delete  
Name: WIDNER, KATHY  
Address: 3808 CAPE VISTA DRIVE  
City-St-Zip: BRADENTON, FL 34209

Title: DT      ( ) Delete  
Name: ROBERSON, MICHAEL  
Address: 11818 SHREWSBURG LANE  
City-St-Zip: PARRISH, FL 34219

Title: D      ( ) Delete  
Name: SPEARS, JEANNINE  
Address: 2700 13TH ST W  
City-St-Zip: PALMETTO, FL 34221

Title: DV      (X) Delete  
Name: THOMPSON, ERIC  
Address: 1610 14 STREET EAST  
City-St-Zip: BRADENTON, FL 34208

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP      (X) Change ( ) Addition  
Name: THOMPSON, ERIC  
Address: 1610 14 STREET EAST  
City-St-Zip: BRADENTON, FL 34208

Title: DT      (X) Change ( ) Addition  
Name: OSBORNE, KEVIN M  
Address: 5010 HEMINGFORD CT  
City-St-Zip: PALMETTO, FL 34221

Title: DS      (X) Change ( ) Addition  
Name: MUNDY, MERRILY  
Address: 12840 STATE ROAD 62  
City-St-Zip: PARRISH, FL 34219

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: KEVIN M. OSBORNE

DT

07/13/2008

Electronic Signature of Signing Officer or Director

Date