

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000003175

**FILED**  
**Apr 21, 2011**  
**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 ( )**

**Name and Address of Current Registered Agent:**

OSBORNE, KEVIN M  
5010 HEMINGFORD CT  
PALMETTO, FL 34221 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:** DP  
**Name:** OSBORNE, KEVIN  
**Address:** 5010 HEMINGFORD CT  
**City-St-Zip:** PALMETTO, FL 34221

**Title:** DV  
**Name:** KNOPE, TIMOTHY  
**Address:** 4107 NOBLE PLACE  
**City-St-Zip:** PARRISH, FL 34219

**Title:** DS  
**Name:** SAMUELS, JANET  
**Address:** 2406 24TH AVE E  
**City-St-Zip:** PALMETTO, FL 23441

**Title:** DT  
**Name:** MCKEAGE, TERESSA  
**Address:** 6012 61ST CT E  
**City-St-Zip:** PALMETTO, FL 34221

I hereby 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 all other like empowered.

**SIGNATURE:** TERESSA MCKEAGE

DT

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date