


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # N04000008380 1. Entity Name NEWSMANATEE, INC.	
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Principal Place of Business 3715 14TH STREET WEST SUITE 17 BRADENTON, FL 34205	Mailing Address 3715 14TH STREET WEST SUITE 17 BRADENTON, FL 34205
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03132008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 55-0885362	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ATKINS, CAROLE
3715 14TH STREET WEST
SUITE 17
BRADENTON, FL 34205**

DO NOT WRITE IN THIS SPACE

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 _____
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, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000888549 04/22/08-80017-012 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP QUINN, MICHAEL C 3715 14TH STREET WEST, SUITE 17 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVPT ATKINS, CAROLE 3715 14TH STREET WEST, SUITE 17 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MURPHY, K. FRANCIS 3715 14TH ST W 17 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: *Michael Quinn* (MICHAEL QUINN) April 7, 2008 (941) 726-1159
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone