


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 11, 2007 8:00 am**  
**Secretary of State**

01-11-2007 90053 045 \*\*\*\*75.00

**DOCUMENT # N05000004036**

1. Entity Name  
**SEAN MANNING FOUNDATION, INC.**



Principal Place of Business **3512 GULF BLVD. 3150 2nd St. West** Mailing Address **3512 GULF BLVD. 3150 2nd St. West**  
 ST. PETERSBURG, FL 33706 ST. PETERSBURG, FL 33706



01052007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>08-8582798</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MANNING, R. SEAN**  
~~3512 GULF BLVD.~~ **3150 2nd Street West**  
 ST. PETERSBURG, FL 33706

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNING, R. SEAN <del>3512 GULF BLVD.</del> <b>3150 2nd Street West</b> ST. PETERSBURG, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNING, LAWRENCE W 111 FREDONIA RD. GREENVILLE, PA 16125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNING, MATTHEW L 111 FREDONIA RD. GREENVILLE, PA 16125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNING, JARID R 111 FREDONIA RD. GREENVILLE, PA 16125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CZYRNY, DENISE M 7135 BEAR RIDGE RD. N. TONAWANDA, NY 14120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CZYRNY, KATIE K 7135 BEAR RIDGE RD. N. TONAWANDA, NY 14120

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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: Richard Sean Manning 1-5-07 727-698-0288  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #