

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000004777

1. Entity Name
BRIDGE OF HOPE OF MANATEE COUNTY, INC.



Principal Place of Business
1108-29TH ST. E
PALMETTO, FL 34221

Mailing Address
P.O. BOX 132
PALMETTO, FL 34220



04232008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0779212

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JONES, BETTY J
1817 US HWY 41 N
PALMETTO, FL 34221

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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 Betty J Jones
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reactivating)

April 23, 2008
DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	JONES, BETTY J
STREET ADDRESS	1819 US HWY. 41 N
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	T
NAME	BROWN, FREDERICK D
STREET ADDRESS	1108-29TH. STREET EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	SD
NAME	MITCHELL, PATRICIA
STREET ADDRESS	2611-35TH AVE WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	T
NAME	SHANNON, PHD, DR. LARRY R
STREET ADDRESS	5255 BRIGHTON SHORE DR
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	T
NAME	ROOSEVELT SR, DUNBAR
STREET ADDRESS	815-31ST STREET EAST
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	T
NAME	MILTON, MARJORIE A
STREET ADDRESS	10616 NAVIGATION DR
CITY-ST-ZIP	RIVERVIEW, FL 33569

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05/16/08-80022-025 61.25

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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: Betty J Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 23, 2008
Date

Daytime Phone #