

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007210

FILED
Apr 21, 2009
Secretary of State

Entity Name: MANASOTA GREAT BANQUET INC.

Current Principal Place of Business:

7045 N. TAMIAMI TRAIL
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

7045 N. TAMIAMI TRAIL
SARASOTA, FL 34243

New Mailing Address:

2040 OLD PINE WAY
SARASOTA, FL 34232

FEI Number: 20-4850567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, "DUTCH", JOHNSON
2040 OLD PINE WAY
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

JOHNSON, VERNA
2040 OLD PINE WAY
SARASOTA, FL 34232 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: VERNA

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STEPHENSON, KEVIN
Address: 2214 SHADOW OAKS RD.
City-St-Zip: SARASOTA, FL 34240

Title: DV () Delete
Name: MERCER, PAUL
Address: 5538 HAYDEN BLVD.
City-St-Zip: SARASOTA, FL 34232

Title: DV () Delete
Name: JENSE, KRISTIN
Address: 5144 MARSHFIELD LN
City-St-Zip: SARASOTA, FL 34235

Title: DS () Delete
Name: MAZZIE, PATTI
Address: 6407 1ST AVE. WEST
City-St-Zip: BRADENTON, FL 34209

Title: DT () Delete
Name: KINDT, PATRICIA
Address: 2789 HARVEST DR
City-St-Zip: SARASOTA, FL 34240

Title: D () Delete
Name: MERCER, FEE
Address: 5538 HAYDEN BLVD.
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEPHENSON, KEVIN
Address: 2214 SHADOW OAKS RD.
City-St-Zip: SARASOTA, FL 34240

Title: DP (X) Change () Addition
Name: MERCER, PAUL
Address: 5538 HAYDEN BLVD.
City-St-Zip: SARASOTA, FL 34232

Title: DV (X) Change () Addition
Name: JENSEN, KRISTIN
Address: 5144 MARSHFIELD LN
City-St-Zip: SARASOTA, FL 34235

Title: DS (X) Change () Addition
Name: JOHNSON, VERNA
Address: 2040 OLD PINE WAY
City-St-Zip: SARASOTA, FL 34232

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VERNA

DS

04/21/2009

Electronic Signature of Signing Officer or Director

Date