

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007594

FILED
Apr 19, 2006
Secretary of State

Entity Name: BLUFFS AT LAKE MANATEE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2400 90TH STREET NORTHWEST
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

2400 90TH STREET NORTHWEST
BRADENTON, FL 34209

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANFULL, WILLIAM L
2400 90TH STREET NORTHWEST
BRADENTON, FL 34209 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: P () Delete
Name: MANFULL, WILLIAM L
Address: 2400 90TH STREET NORTHWEST
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: MANFULL, WILLIAM L
Address: 2400 90TH STREET NORTHWEST
City-St-Zip: BRADENTON, FL 34209

Title: T () Delete
Name: MANFULL, WILLIAM L
Address: 2400 90TH STREET NORTHWEST
City-St-Zip: BRADENTON, FL 34209

Title: S () Delete
Name: MANFULL, WILLIAM L
Address: 2400 90TH STREET NORTHWEST
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: WILLIAM L MANFULL

P

04/19/2006

Electronic Signature of Signing Officer or Director

Date