

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010805

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** MANATEE COUNTY SUBSTANCE ABUSE COALITION, INC.

**Current Principal Place of Business:**

1112 MANATEE AVENUE WEST  
SUITE 303  
BRADENTON, FL 34205 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1000  
CIVIL & COASTAL ENGINEERING DEPT.  
BRADENTON, FL 34206 US

**New Mailing Address:**

P.O. BOX 1000  
SUITE 303  
BRADENTON, FL 34206 US

**FEI Number:** 27-1254684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRAMER, SHARON  
1112 MANATEE AVENUE WEST  
SUITE 303  
BRADENTON, FL 34205 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: C  
Name: WILSON, CATHERINE  
Address: P.O. BOX 1000  
City-St-Zip: BRADENTON, FL 34206 US

Title: VC  
Name: ANDERSON, LYNN  
Address: P.O. BOX 1000  
City-St-Zip: BRADENTON, FL 34206 US

Title: R  
Name: MAIER, LISA  
Address: P.O. BOX 1000  
City-St-Zip: BRADENTON, FL 34206 US

Title: T  
Name: LA MANNA, JAMES M  
Address: P.O. BOX 1000  
City-St-Zip: BRADENTON, FL 34206 US

I hereby 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 all other like empowered.

SIGNATURE: SHARON KRAMER

D

01/08/2010

Electronic Signature of Signing Officer or Director

Date