## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11153

FILED Jan 12, 2011 Secretary of State

Entity Name: AMIKIDS MANATEE, INC.

Current Principal Place of Business:

**New Principal Place of Business:** 

906 17 ST W.

PALMETTO, FL 34221 US

Current Mailing Address: New Mailing Address:

ASSOCIATED MARINE INSTITUTES 5915 BENJAMIN CENTER DRIVE TAMPA, FL 33634 US AMIKIDS, INC. 5915 BENJAMIN CENTER DRIVE TAMPA, FL 33634 US

FEI Number: 59-2553270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HULL, DAVID SMITH, HULSEY, & BUSEY 225 WATER STREET STE.,#1800 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: [

 Name:
 ELOISE, LISCH

 Address:
 215 25TH ST W

 City-St-Zip:
 BRADENTON, FL 34205

Title: P

Name: SNIFFEN, CHARLIE

Address: 417 OLD MAIN STREET, STE 205

City-St-Zip: BRADENTON, FL 34205

Title: VP

 Name:
 LEWIS, JEFF

 Address:
 100 10TH ST W

 City-St-Zip:
 BRADENTON, FL 34205

Title: ST

Name: WYMER, DAVID

Address: 4502 CORTEZ ROAD WEST City-St-Zip: BRADENTON, FL 34210

Title:

Name: STANDER, O.B.

Address: 5915 BENJAMIN CENTER DRIVE

City-St-Zip: TAMPA, FL 33634

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: O.B. STANDER D 01/12/2011