

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11387

FILED
Jan 04, 2005
Secretary of State

Entity Name: MANA-SOTA LIGHTHOUSE FOR THE BLIND, INC.

Current Principal Place of Business:

7318 N. TAMIAMI TRAIL
SARASOTA, FL 342438401

New Principal Place of Business:

Current Mailing Address:

7318 N. TAMIAMI TRAIL
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 59-2591136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FELSKI, JANICE
7318 N TAMIAMI TRIAL
SARASOTA, FL 34243 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: CRUIKSHANK, DAVID
Address: PO BOX 9729
City-St-Zip: BRADENTON, FL 34206

Title: V (X) Delete
Name: SLOSS, NAN
Address: 9234 13TH AVE. CIRCLE NW
City-St-Zip: BRADENTON, FL 34209

Title: ST () Delete
Name: HENDRY, BETTY
Address: 770 SOUTH PALM AVENUE, #1101
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: EUGENE, BECKSTEIN
Address: 7418 WESTMORELAND DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: REEVES, A
Address: 121 SHORELAND DRIVE
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: RUTKOWSKY, W
Address: 5005 MANATEE AVE WEST
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:

Title: V (X) Change () Addition
Name: REEVES, ANDY
Address: 121 SHORELAND DRIVE
City-St-Zip: OSPREY, FL 34229

Title: V (X) Change () Addition
Name: RUTKOWSKY, WALTER
Address: 5005 MANATEE AVE WEST
City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID CRUIKSHANK

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date