

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2003 8:00 am
Secretary of State

08-08-2003 90093 046 *****70.00

0055988

DOCUMENT # N14240

1. Entity Name

MANATEE COUNTY FIRE COMMISSIONERS' ASSOCIATION, INC.



Principal Place of Business

**C/O JESSE LINN DAVIS
6001 MARINA DRIVE
HOCWAS BEACH FL 34217**

Mailing Address

**C/O JESSE LINN DAVIS
6001 MARINA DRIVE
HOCWAS BEACH FL 34217**

2. Principal Place of Business

6001 MARINA DR

3. Mailing Address

6001 MARINA DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Holmes Beach, FL

City & State

Holmes Beach, FL

4. FEI Number **65-0033411**

Applied For

Not Applicable

Zip

34217

Country

Zip

34217

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVIS, JESSE LINN
6001 MARINA DRIVE
HOCWAS BEACH FL 34217**

Name

Mary Stephens

Street Address (P.O. Box Number is Not Acceptable)

6001 MARINA DRIVE

City

Holmes Beach

FL

Zip Code

34217

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Mary Stephens

MARY STEPHENS

7/7/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIS, JESSE LINN 5809 3RD AVENUE W BRADENTON FL 34209	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RANNEY, BRAD J 3407 28TH ST E BRADENTON FL 34208	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BON AMI, JAMES D 8800 SR 70 EAST BRADENTON FL 34202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ranney, Brad J 3407 28th Street East Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Tyler, Larry 9604 44th Avenue West # 223 Bradenton, FL 34210	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Bon Ami, James D. 8800 SR 70 EAST Bradenton FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Milner, Mark 5022 46th Street Bradenton, FL 34210	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES D. BON AMI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **07-07-03** Dorsing Phone #

(941) 741-8899

CR2E037 (10/02)