

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90141 020 \*\*\*\*61.25

**DOCUMENT # N20504**

1. Entity Name  
**GREATER MANATEE CHAPTER OF FLORIDA WOMEN IN  
GOVERNMENT, INC.**



Principal Place of Business  
P.O. BOX 202  
1112 MANATEE AVE. W  
BRADENTON, FL 34206 US

Mailing Address  
P.O. BOX 202  
BRADENTON, FL 34206

14061501



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
65-0066637

Applied For  
Not Applicable

Zip

Country

Zip

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

OTT, MARILYN  
3202 9TH AVENUE WEST  
BRADENTON, FL 34205

Name

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

City

FL

Zip Code

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

*Marilyn Ott*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04/27/2004

Filing Fee is \$61.25  
Due by May 1, 2004

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 PD ☐ Delete  
NAME OTT, MARILYN  
STREET ADDRESS 3202 9TH AVENUE W.  
CITY-ST-ZIP BRADENTON, FL 34205

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME DUNBAR, JANICE  
STREET ADDRESS 108 23RD STREET CT. NE.  
CITY-ST-ZIP BRADENTON, FL 34208

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☒ Delete  
NAME KRAUSE, JAN  
STREET ADDRESS 45 MEADOWLARK CIRCLE  
CITY-ST-ZIP ELLENTON, FL 34222

TITLE ☒ Change ☐ Addition  
NAME Elaine Apostol  
STREET ADDRESS 106 6th Ave Dr. W  
CITY-ST-ZIP Bradenton, FL 34207

TITLE TD ☐ Delete  
NAME BURCH-MOORE, TAMEKA  
STREET ADDRESS 4515 26TH STREET W. #1812  
CITY-ST-ZIP BRADENTON, FL 34207

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME BOGGS, TAMMY  
STREET ADDRESS 4037 47TH STREET  
CITY-ST-ZIP SARASOTA, FL 34235

TITLE ☒ Change ☐ Addition  
NAME Kelli Polanski  
STREET ADDRESS 4706 8th St Ct E  
CITY-ST-ZIP Ellenton, FL 34222

TITLE D ☐ Delete  
NAME KERNS, JOYCE  
STREET ADDRESS 3716 16TH STREET CT. STE E  
CITY-ST-ZIP BRADENTON, FL 34208

TITLE ☒ Change ☐ Addition  
NAME Ardella Cannon  
STREET ADDRESS 3215 Bunch St  
CITY-ST-ZIP Sarasota, FL 34234

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:

*Tameka Burch-Moore*  
Tameka Burch-Moore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/04