

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 8:00 am
Secretary of State

03-05-2007 90054 020 ****61.25

DOCUMENT # N21247 1. Entity Name MANATEE SAILING ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 14482 BRADENTON, FL 34280-4482			Mailing Address P.O. BOX 14482 BRADENTON, FL 34280-4482		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country			
4. FEI Number NOT APPLICABLE 59-2921866				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				03032007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent DAVIDSON, SUSAN 5108 ARLINGTON RD. PALMETTO, FL 34221			7. Name and Address of New Registered Agent Name JAMES LUTHER Street Address (P.O. Box Number is Not Acceptable) 106 VERMONT AVE E City BRADENTON FL Zip Code 34208		
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 3/2/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D THOMPSON, GRAEME 4707 ARLINGTON ROAD PALMETTO, FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MICHAEL FAUSER 5203 ARLINGTON RD PALMETTO, FL 34221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DAVIDSON-SMITH, SUSAN 5108 ARLINGTON RD PALMETTO, FL 34221	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete LUND, ROBERT 4707 2ND AVE. DR. WEST BRADENTON, FL 34209	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete O'BRIEN, CAROLYN 201 73RD ST. NW BRADENTON, FL 34209	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete BAMIS, ANN 8615 BAYSHORE RD. #20 PALMETTO, FL 34221	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BEKIS, ANN 8615 BAYSHORE RD #20 PALMETTO, FL 34221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JAMES LUTHER 106 VERMONT AVE E BRADENTON, FL 34208		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 3/2/07 941-284-8401 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					