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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N32197

1. Corporation Name

POLICE ATHLETIC LEAGUE OF MANATEE COUNTY, INC.

Principal Place of Business

202 13TH AVE. EAST
ATTN: SHANDRA SEWALL-FINANCE
BRADENTON FL 34208
US

Mailing Address

202 13TH AVE. EAST
ATTN: SHANDRA SEWALL-FINANCE
BRADENTON FL 34208
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

05/09/1989

4. FEI Number

65-0122462

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ROBINSON, LAYON F., II
442 OLD MAIN STREET
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME ROBINSON, LAYON F II
STREET ADDRESS 442 OLD MAIN STREET
CITY-ST-ZIP BRADENTON FL

TITLE V ☐ DELETE

NAME VANBUREN, DR. G
STREET ADDRESS 2703 19TH ST. CT. E.
CITY-ST-ZIP BRADENTON FL

TITLE T ☐ DELETE

NAME BROOKS, CHESTER
STREET ADDRESS 6404 MANATEE AVE. W., SUITE L
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ DELETE

NAME RICHERT, TIM
STREET ADDRESS 4005 51ST ST E.
CITY-ST-ZIP BRADENTON FL

TITLE S ☐ DELETE

NAME FOSTER, BRENDA
STREET ADDRESS 202 13TH AVE E.
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ DELETE

NAME PRESHA, WALTER (
STREET ADDRESS P O BOX 106 N/A
CITY-ST-ZIP PARRISH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)