FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

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DOCUMENT #1. Corporation Name

THE FAMILY NETWORK ON DISABILITIES OF MANATERISA

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RASOTA,						
Principal Place of	Business	Mailing Address		3. Date Incorporated or Qualified		
P.O. BOX 10707 BRADENTON FL 34	1282	P.O. BOX 10707 BRADENTON FL 3	4282			
				4. FEI Number 65-0156905		
2. Principal Place	of Business	2a. Mailing Addre	986	5. Certificate of Status Desired		
Suite, Apt. #, e	itc.	Suite, Apt. #,	etc.	Election Campaign Financing Trust Fund Contribution		
City & State		City & State		7. Is this nonprofit corporation a h		
Zip	Country	Zip	Country	8. This corporation owes or has a		

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FILED May 05 1998 8:00am Secretary of State



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Yes

☐ Yes

Is this nonprofit corporation a homeowners association?

8. This corporation owes or has paid the current year Intangible

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

Personal Property Tax due June 30.

						4					
BLUMENTHAL, ROBERTA 2203 - 24 ST WEST			81 1	81 Name Mary J. Smith							
			82 8								
				5607 61st Street East							
Brandenton FL 34205				63							
			84 City			85 Zip (-nde				
			Bradenton			FL 34203					
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 fagiliar with, and accept the obligation of Section 617.0503, Florida Statutes.											
SIGNATURE	Mans a sm	ith Mo	ary S	<u> 7. S</u>	mith	3-3-98					
	Signature, typed or printed representations agent and title			signature	required when reinstating)	DATE					
12.	OFFICERS AND DIREC		13.		ADDITIONS/CHANGES TO OFFIC						
TITLE	PD	DELETE		$\mathcal{D} \mid$	President	Change	L Addition				
NAME	HEIDEMAN, MARGARITA		1.2 NAME		Mary J. Smith		i				
STREET ADDRESS	5906 PINETREE DRIVE		1.3 STREET AD		5607 61st Street East		l				
CITY-ST-ZIP	BRADENTON FL	D process	1.4 CITY-ST-Z	_	Bradenton, FL		1				
TITLE	VPD	DELETE	2.1 TITLE •	フ	1st Vice President	Change	Addition				
NAME	MACOMBER, SANDY		2.2 NAME		Margarita Heideman						
STREET ADDRESS	9003 PINE NEEDLE CIR		2.3 STREET AD	ORESS	5906 Pinetree Drive						
CITY-ST-ZIP	BRADENTON FL		2. 4 City-St-	ZIP	Bradenton, FL	det o	F 1 2 2 191				
TITLE	TD	DELETE XX	3.1 TITLE		2nd Vice President	Change	☐ Addition				
HAME	MARKS, AMY		3.2 NAME		Nancy Marsh		Į.				
STREET ADDRESS	4606 PARKLAKE TERRACE N		3.3 STREET AD		4190 Drakeswood Circle		[
CITY-ST-ZWP	BRANDENTON FL		3.4. CITY-ST-2	ZIP							
TITLE	\$	DELETE	4.1 TITLE	<u> </u>	Sarasota, FL	XX Change	☐ Addition				
HAME	SMITH, MARY		4. 2 NAME	$D \mid$	Treasurer		ľ				
STREET ADDRESS	5607-61ST ST, E		4.9 STREET AD	ORESS	Judy Hager		Į.				
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-ST-Z	ZIP	5616 61st Street East						
TITLE		☐ DELETE	5.1 TITLE		Bradenton, FL	☐ Change	Addition				
NAME			5.2 NAME				ŀ				
STREET ADDRESS			5.3 STREET ADI	ORESS							
CITY-ST-ZIP			5.4 CITY-ST-Z	ZIP	<u> </u>						
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition				
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET AD	ORESS							
CITY-ST-ZIP			6.4 CITY-ST-Z	ZIP							
14. I hereby c	ertify that the information supplied with this t	iling does not qualify for t	a evemntion	n eteto	d in Section 119 07(3Vi) Florida Statutos I	further certify that the	Information				

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the Informatio 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. 3-3-98 941-755-7325