

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-23-2002 90340 037 ****70.00

DOCUMENT # N34481

1. Entity Name

THE FAMILY NETWORK ON DISABILITIES OF MANATEE/SARASOTA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 10707
 BRADENTON FL 34282

P.O. BOX 10707
 BRADENTON FL 34282

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0156905**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, MARY J.
4626 SUMMER OAK AVE, EAST APT. #916
SARASOTA FL 34243

Name **Mary J. Smith**

Street Address (P.O. Box Number is Not Acceptable)
6153 36th Lane East

City **Bradenton**

FL

Zip Code
34203

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.

SIGNATURE *Mary J. Smith*
 Signature, typed or printed name of registered agent and title if applicable.

Mary J. Smith, Executive Director **4-9-02**
 (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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOLZ, GARY 8413 13TH AVE. NW BRADENTON FL 34209	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARSH, NANCY 4190 DRAKESWOOD CIRCLE SARASOTA FL 34232	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SMITH, MARY 4626 SUMMER OAK AVE. EAST APT. #916 SARASOTA FL 34232	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CAMPAGNA, STENA 4187 DRAKESWOOD DR. SARASOTA FL 34232	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President -D Nancy E. Marsh 4190 Drakeswood Circle Sarasota, FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer -D Kim Ross 5310 Gardens Drive Sarasota, FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President -D Sarah Warren 119 Whitfield Avenue Sarasota, FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary -D Mary Breager 6308 Cornell Road Bradenton, FL 34207	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

Kim Ross
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-02 (941)351-5902
 Date Daytime Phone #

CR2E037 (9/01)