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NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # **N35933**

1. Corporation Name

MANATEE PERSONAL COMPUTER USERS GROUP, INC.

Principal Place of Business

4835 27TH STREET W.
 SUITE 135
 BRADENTON FL 34207
 US

Mailing Address

5726 CORTEZ RD W.
 STE 286
 BRADENTON FL 34210
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

12/26/1989

4. FEI Number

59-2921866

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

LYNN PARKER
 9604 CORTEZ WEST #233
 4112 PLUMOSA TERRACE
 BRADENTON FL 34210

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: TD
 NAME: GUNLOGSON, LEE
 STREET ADDRESS: 4937 PERIDIA BLVD E
 CITY-ST-ZIP: BRADENTON FL 34203
 DELETE

TITLE: VD
 NAME: MCGRATH, JAMES
 STREET ADDRESS: 2002 30TH AVE W
 CITY-ST-ZIP: BRADENTON FL
 DELETE

TITLE: PD
 NAME: MCLAUGHLIN, DON
 STREET ADDRESS: 2632 47TH AVE W
 CITY-ST-ZIP: BRADENTON FL 34207
 DELETE

TITLE: SD
 NAME: KINCAID, GLORIA
 STREET ADDRESS: 4703 36TH AVENUE WEST
 CITY-ST-ZIP: BRADENTON FL
 DELETE

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 DELETE

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: ~~Treasurer T~~
 1.2 NAME: Cindy Starowesky
 1.3 STREET ADDRESS: 926 Mill Creek Rd.
 1.4 CITY-ST-ZIP: Bradenton, FL 34202
 Change Addition

2.1 TITLE:
 2.2 NAME: → SAME
 2.3 STREET ADDRESS:
 2.4 CITY-ST-ZIP:
 Change Addition

3.1 TITLE: ~~President P~~
 3.2 NAME: → MCLAUGHLIN, DON
 3.3 STREET ADDRESS: 2632 47th Ave. W.
 3.4 CITY-ST-ZIP: Bradenton, FL 34207
 Change Addition

4.1 TITLE:
 4.2 NAME: → Same
 4.3 STREET ADDRESS:
 4.4 CITY-ST-ZIP:
 Change Addition

5.1 TITLE:
 5.2 NAME:
 5.3 STREET ADDRESS:
 5.4 CITY-ST-ZIP:
 Change Addition

6.1 TITLE:
 6.2 NAME:
 6.3 STREET ADDRESS:
 6.4 CITY-ST-ZIP:
 Change Addition

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]* SIGNATURE REQUIRED

2-3-99 941/75-1339

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)