


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90071 034 \*\*\*\*61.25

<b>DOCUMENT # N35933</b> 1. Entity Name <b>MANATEE PERSONAL COMPUTER USERS GROUP, INC.</b>					
Principal Place of Business <b>4835 27TH STREET W. SUITE 135 BRADENTON, FL 34207 US</b>			Mailing Address <b>5726 CORTEZ RD W. STE 286 BRADENTON, FL 34210 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		01042007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number <b>59-2921866</b>	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BOZZETTI, MARY ANN 1116 64TH ST. N.W BRADENTON, FL 34209</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAILING, EILEEN 5811 11 ST EAST BRADENTON, FL 34203 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, Bob 512 Spring Lakes Blvd BRADENTON, FL 34210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DODGE, CHRISTINE <i>DODGE, Christine</i> 6101 34TH ST WEST <i>6101 34th St W 189</i> BRADENTON, FL 34210 <i>BRADENTON FL 34210</i> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PALMIERI, LYLA 4721 13th St E #266 BRADENTON FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLOWERS, DONALD S JR. <i>Flowers, Donald S Jr</i> 4202 17TH AVE. W. BRADENTON, FL 34205 <i>BRADENTON, FL 34205</i> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer PATEY SKINNER 256 Sherwood Dr BRADENTON, FL 34210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOZZETTI, MARY ANN 1116 64 ST NW BRADENTON, FL 34209 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARB STEVENS 4746 11th St E #225 BRADENTON, FL 34203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHNIEDER, JACK 2624 30 ST WEST BRADENTON, FL 34205 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYLER, LARRY JR 9604 CORTER RD., APT 223 BRADENTON, FL 34210 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> <i>Mary Ann Bozzetti</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>2/5/07</i> Daytime Phone # <i>792-7320</i>		