

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2006 08:00 AM
Secretary of State

DOCUMENT # N37343

1. Entity Name

MANATEE BROADCASTERS, INC.



Principal Place of Business

**519 13TH ST W
519 13TH ST W
BRADENTON, FL 34205 US**

Mailing Address

**519 13TH ST W
519 13TH ST W
BRADENTON, FL 34205 US**



07312006 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0182598

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MULOCK, EDWIN T. ESQ
519 13TH ST W
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MULOCK, EDWIN T
STREET ADDRESS 519 13TH ST W
CITY-ST-ZIP BRADENTON, FL 34205

TITLE D
NAME GALLO, GENE
STREET ADDRESS 6607 27TH AVE W
CITY-ST-ZIP BRADENTON, FL 34209

TITLE VPD
NAME BROWN, GENE
STREET ADDRESS 318 32ND STREET W
CITY-ST-ZIP BRADENTON, FL 34205

TITLE D
NAME BRISTOW, DAVE
STREET ADDRESS 6908 7TH AVE NW BLVD
CITY-ST-ZIP BRADENTON, FL 34209

TITLE STD
NAME BROWN, CHARLES
STREET ADDRESS 5824 26TH ST W
CITY-ST-ZIP BRADENTON, FL 34207

TITLE D
NAME CARTER, DANNY
STREET ADDRESS 4908 27TH AVE
CITY-ST-ZIP BRADENTON, FL 34205

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08/09/06-80005-006 61.25

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/06

Date

(941) 758-7788

Daytime Phone #