FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N44633 1. Corporation Name

MAN TO MAN, INCORPORATED

FILED Feb 23, 1999 8:00 am § Secretary of State

02-23-1999 90096 031 ****61.25

Principal Place of Business Mailing Address				 	
					C INCLINAT DIE BERTH DERIG REISE BEIND EIN ANDE BERTH DER BERTH BERTH BERTH BERTH BERTH BERTH BERTH BERTH BERTH
910 CONTENTO STREET SARASOTA FL 34242 910 CONTENTO STREET SARASOTA FL 34242 SARASOTA FL 34242					
2. Principal Pl	ace of Business	2a. Mailing Address	3		3. Date incorporated or Qualifed 08/09/1991
Suite, Apt. #, etc. Suite, Apt. #, etc					4. FEI Number Applied For
22		27			65-0279577 Not Applicable
City & State		City & State			\$8.75 Additional
23	_ •				5. Certificate of Status Desired Fee Required
Zip			Country	,	6. Election Campaign Financing S5.00 May Be
24	25 29 30]		Trust Fund Contribution Added to Fees
[24]	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent
81 Name					
COPPINGER, BOIES P., JR.			82	Street A	Address (P.O. Box Number is Not Acceptable)
910 CONTENTO STREET			83	<u> </u>	
SARASOTA FL 34242			63	<u> </u>	
			84	City	FL 85 Zip Code
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.	OF TOP THE BUILD OF THE		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD _	☐ DELETE	1.1 TITLE	1	SCHNEIDER (NOT SCHNEISER)
NAME	schneißer, bernard r		1.2 NAME	1	001111212221
STREET ADDRESS	3983 PRAIRIE DUNES DR		13 STREE	TADDRESS	
CITY-ST-ZIP	SARASOTA FL 34238		1.4 CITY-5	iT-ZIP	
TITLE	PD	☐ DELETE	2.1 TITLE		Mar Change
NAME	STULTS, ELWIN M., III		2.2 NAME		
STREET ADDRESS	-440-ISLAND CIR*		2.3 STREE	T ADDRESS	5233 VANDERIPE ROAD
CITY-ST-ZIP	SARASOTA FL 34242		2, 4 CITY-	ST-ZIP	SARASOTA, FL 34241-9592
TITLE	STD	☐ DELETÉ	3.1 TITLE		☐ Change ☐ Addition
NAME	COPPINGER, BOIES P., JR.		3.2 NAME		
STREET ADDRESS	910 CONTENTO ST.			T ADDRESS	
	SARASOTA FL	-	3.4. CITY-		34242-1816
CITY-ST-ZIP	SANASUIA FL	☐ DELETE	4.1 TITLE	5+**LIF	Change Addition
		₩ 200010	4. 2 NAME	1	
NAME					
STREET ADDRESS				TADORESS	•
CITY-ST-ZiP		FIREFE	4.4 CITY-1	ST-ZIP j	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		El Autonou
NAME				TADDECCC	·
STREET ADDRESS	JUNESO .			TADDRESS	·
CITY-ST-ZIP			5.4 CITY-5	5T-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP	r .		6.4 CITY-	ST-ZIP	

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.

1/05/99

SIGNATURE: