

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # N48619

1. Entity Name
SAVE THE MANATEE CLUB, INC.



Principal Place of Business

**500 MAITLAND AVE.
SUITE 210
MAITLAND, FL 32751**

Mailing Address

**500 N. MAITLAND AVE
SUITE #210
MAITLAND, FL 32751 US**



01172007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3131709

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE, FL 32301**

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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 resigning)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution.



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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BUFFETT, JIMMY
256 WORTH AVE
PALM BEACH, FL 33480**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPIVEY, HELEN
4172 S KINDNESS POINT
HOMOSASSA, FL 34448**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DOMNING, DARYL
9211 WENDELL ST
SILVER SPRING, MD 20901**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SIRY, JOSEPH
2648 BROOKSIDE COURT
MAITLAND, FL 32751**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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.

Patrick M. Rose
Signature

PATRICK M. ROSE
printed name

1/25/09
Date

407 539-0990
Phone