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FILED
Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N50133** (0)
1. Corporation Name
MANATEE COMMISSION ON THE STATUS OF WOMEN, INC.

Principal Place of Business 6210 17TH AVE WEST BRADENTON FL 34209	Mailing Address 6210 17TH AVE WEST BRADENTON FL 34209-7838 c/o Freedom Village 6501 17th Ave. W.
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2. Principal Place of Business 21 c/o Freedom Village Suite, Apt. #, etc. 22 6501 17th Ave. W. City & State 23 Bradenton, FL Zip 24 34209	2a. Mailing Address 26 c/o Freedom Village Suite, Apt. #, etc. 27 6501 17th Ave. W. City & State 28 Bradenton, FL Zip 29 34209	3. Date Incorporated or Qualified 07/22/1992	3a. Date of Last Report 02/05/1996
		4. FEI Number 65-0445774	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GERBER, LOIS 6210 17TH AVE WEST BRADENTON FL 34209	10. Name and Address of New Registered Agent 81 Name Peg McGarity 82 Street Address (P.O. Box Number is Not Acceptable) 6501 17th Ave. W. 83 Freedom Village 84 City Bradenton FL 85 Zip Code 34209
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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 Margaret H. McGarity (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable DATE 4/16/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE GERBER, LOIS 6210 17TH AVE W BRADENTON FL	1.1 TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GERBER, LOIS		1.2 NAME Peg McGarity	
STREET ADDRESS 6210 17TH AVE W		1.3 STREET ADDRESS 6501 17th Ave. W.	
CITY-ST-ZIP BRADENTON FL		1.4 CITY-ST-ZIP Bradenton, FL 34209	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP	<input type="checkbox"/> DELETE HAMILTON, ELIZABETH 408 SANDPIPER CIR BRADENTON FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HAMILTON, ELIZABETH		2.2 NAME	
STREET ADDRESS 408 SANDPIPER CIR		2.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL		2.4 CITY-ST-ZIP	
TITLE T	<input type="checkbox"/> DELETE AREND, PAT 501 BAY ISLES RD. LONGBOAT KEY FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME AREND, PAT		3.2 NAME	
STREET ADDRESS 501 BAY ISLES RD.		3.3 STREET ADDRESS	
CITY-ST-ZIP LONGBOAT KEY FL		3.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE LOINMAN, MARGE 3309 2ND AVE WEST BRADENTON FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LOINMAN, MARGE		4.2 NAME Correct Spelling: KINNAN	
STREET ADDRESS 3309 2ND AVE WEST		4.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE TALBURTT, BARBARA 637 SPRING LAKE BLVD BRADENTON FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TALBURTT, BARBARA		5.2 NAME	
STREET ADDRESS 637 SPRING LAKE BLVD		5.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE RUNNELLS, MARY 210 22ND STREET CT NE BRADENTON FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RUNNELLS, MARY		6.2 NAME	
STREET ADDRESS 210 22ND STREET CT NE		6.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: [Signature] 3-5 84 9-10-1997

CR2E037 (9/96)