

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am  
Secretary of State

04-23-2001 90216 045 \*\*\*\*70.00

DOCUMENT # N50133

1. Entity Name

MANATEE COMMISSION ON THE STATUS OF WOMEN, INC.

Principal Place of Business

504 MONTEZUMA DR.  
BRADENTON FL 34209  
US

Mailing Address

MANATEE COMMISSION OF THE STATUS OF WOMEN  
504 MONTEZUMA DR  
BRADENTON FL 34209

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0445774

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NORRIS, NANCY L  
116 81ST STREET WEST  
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

34209

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.

SIGNATURE

JUNE ISHELL

JUNE ISHELL

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	NORRIS, NANCY L	
STREET ADDRESS	116 81ST STREET WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	JOCHENS, JEANNE	
STREET ADDRESS	1132 DENNY DR.	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	T	<input type="checkbox"/> Delete
NAME	ISHELL, JUNE	
STREET ADDRESS	504 MONTEZUMA DR.	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	YENERALO, MARY	
STREET ADDRESS	6447 EGRET LANE	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RUNNELLS, MARY	
STREET ADDRESS	219-22ND ST. CT. NE	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOODRIDGE, MARJORIE	
STREET ADDRESS	324 TIMBERLAKE DR.	
CITY-ST-ZIP	BRADENTON FL 34210	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Patricia Arends	
STREET ADDRESS	P.O. Box 217	
CITY-ST-ZIP	Longboat Key, FL 34228	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mary Runnels	
STREET ADDRESS	219-22nd St. Ct. NE	
CITY-ST-ZIP	Bradenton, FL 34205	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jane Ingram	
STREET ADDRESS	1504-18th St. E	
CITY-ST-ZIP	Bradenton, FL 34208	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dorothy Middleton	
STREET ADDRESS	215-11th Ave. W.	
CITY-ST-ZIP	Bradenton FL 34205	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jean Van Delft	
STREET ADDRESS	1650-1st Ave. W #408	
CITY-ST-ZIP	Bradenton, FL 34205	

12. 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/2001 (941) 792-5691

Date Daytime Phone #

CR2E037 (10/00)