

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003884

1. Entity Name

MANATEE LAW ENFORCEMENT GAMES INC.

**FILED**  
Feb 06, 2001 8:00 am  
Secretary of State

02-06-2001 90278 021 \*\*\*\*70.00

Principal Place of Business

515 11TH ST. WEST  
BRADENTON FL 34205

Mailing Address

515 11TH ST. WEST  
BRADENTON FL 34205

00014030



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0470226

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

7. Name and Address of New Registered Agent

HIGGINBORNAM, SHERRY  
515 11TH ST. WEST  
BRADENTON FL 34205

Name

Gregory R. Buchanan

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

515 11 ST W

City

Bradenton

FL

Zip Code

34205

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

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

President

(NOTE: Registered Agent signature required when reinstating)

DATE

1/30/01

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SANchez, ROBERT W 341 SEA GRAPE RD. VENICE FL 34293
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete P HIGGINBOTHAM, SHERRY PO BOX 298 PARRISH FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete S BOLUEN, CHUCK 2715 40TH AVE W BRADENTON FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete BMD MURRELL, JOHN 7715 118TH AVE N PARRISH FL 34219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete BMD BASS, BARRY 116 53 8TH AVE CIR E. BRADENTON FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete BMD PEREZ, JOEL 4510 34TH AVE E BRADENTON FL 34208

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition President Gregory R Buchanan 515 11st W BRADENTON FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Bowen, Chuck 515 11st W BRADENTON FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Vice President John Murrell 515 11st W BRADENTON FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BMD PAUL FIEBER 515 11st W BRADENTON FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/01 941-747-3011 x 2506

CR2E037 (10/00)