

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

93 MAY 16 AM 8:44

DOCUMENT # N94000001818 (3)

1. Corporation Name

MANATEE-HEE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/13/1994

3a. Date of Last Report N/A

4. FEI Number 65-0487491

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 1525 S. ANDREWS AVE

26 Suite, Apt. #, etc.

22 206

27 Suite, Apt. #, etc.

23 City & State

28 City & State

23 FT. LAUDERDALE, FL

28 City & State

24 Zip 33316

29 Zip

25 Country USA

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BATTISTINI, PAT
1326 SE 17TH STREET
STE. 216
FORT LAUDERDALE FL 33316

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE D ☐ Change ☒ Addition
12 NAME PAT BATTISTINI
13 STREET ADDRESS 1326 SE 17TH ST. # 216
14 CITY - ST - ZIP FORT LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE D ☐ Change ☒ Addition
22 NAME RICK KASBEE
23 STREET ADDRESS 1326 SE 17TH ST. # 216
24 CITY - ST - ZIP FORT LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE D ☐ Change ☒ Addition
32 NAME MARYANNE DREW SATTEE
33 STREET ADDRESS 1326 SE 17TH ST. # 216
34 CITY - ST - ZIP FT. LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 on the receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

5/12 (305)463-0670