

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005042

1. Entity Name

BRADENTON HOUSING AUTHORITY RESIDENTS' ASSOCIATI

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90241 011 ****61.25

Principal Place of Business 1300 5TH STREET WEST BRADENTON FL 34205	Mailing Address 1300 5TH STREET WEST BRADENTON FL 34205-8450
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-6002720	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DESUE, WILLIAM B SR
% BRADENTON HOUSING AUTHORITY
1300 5TH STREET WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

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. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GARNER, LUBERTHA	
STREET ADDRESS	1300 5TH ST SW A-9	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	VP	<input type="checkbox"/> Delete
NAME	DONBAR, MARY R.	
STREET ADDRESS	303 15TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	T	<input type="checkbox"/> Delete
NAME	RIVERS, YOLANDA	
STREET ADDRESS	1300-5TH ST W B-19	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	T	<input type="checkbox"/> Delete
NAME	MABRY, IVORY	
STREET ADDRESS	1507 3RD ST W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	T	<input type="checkbox"/> Delete
NAME	PETERSON, BARBARA	
STREET ADDRESS	1405 - 3RD ST W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 another like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

CR2E037 (9/99)