

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005043

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** MANATEE LODGE #70, FRATERNAL ORDER OF POLICE ASSOCIATES, INC.

**Current Principal Place of Business:**

1825 11TH ST W  
BRADENTON, FL 34205

**New Principal Place of Business:**

**Current Mailing Address:**

1825 11TH ST W  
BRADENTON, FL 34205

**New Mailing Address:**

**FEI Number:** 65-0596654

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COVELLIA, MICHAEL PA  
6023 26TH ST. WEST  
135  
BRADENTON, FL 34207 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HAYES, DALE C  
Address: 1405 14TH STREET, COURT W  
City-St-Zip: PALMETTO, FL 34221

Title: V ( ) Delete  
Name: JOHNSON, SUE F  
Address: 2718 AVENUE C  
City-St-Zip: HOLMES BEACH, FL 34217

Title: T ( ) Delete  
Name: CASE, BARBARA A  
Address: 486 SANDALWOOD LANE  
City-St-Zip: ELLENTON, FL 34222

Title: S ( ) Delete  
Name: SAVOIE, BARBARA M  
Address: 2903 NORWICH DRIVE WEST  
City-St-Zip: BRADENTON, FL 34205

Title: TR ( ) Delete  
Name: BEATTY, CAROLYN D  
Address: 210 3RD STREET WEST, #6202  
City-St-Zip: BRADENTON, FL 34205

Title: C ( ) Delete  
Name: DODD, SAMUEL  
Address: 1050 134TH ST. NE  
City-St-Zip: BRADENTON, FL 34212

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL KENT DODD

C

04/24/2006

Electronic Signature of Signing Officer or Director

Date