

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003475

1. Entity Name

MANATEE WIDOWED PERSONS SERVICE, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90020 016 ****70.00

Principal Place of Business

Mailing Address

4140 20TH ST W
BRADENTON FL 34205

7222 MEADOW BROOK DR.
SARASOTA FL 34243-1626



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1700 3RD AVE W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRADENTON FL

City & State

4. FEI Number

65-0484838

Applied For

Not Applicable

Zip

Country

Zip

Country

34205

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

WOOD, MARTHA G
7222 MEADOW BROOK DR.
SARASOTA FL 34243-1626

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. ☐

\$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 ☐ Delete
NAME P
STREET ADDRESS WOOD, MARTHA G
CITY-ST-ZIP 7222 MEADOW BROOK DR.
SARASOTA FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS WILSON, THOMAS R.
CITY-ST-ZIP 1200 AURORA BLVD.
BRADENTON FL 34202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME V
STREET ADDRESS DEPEW, GORDON
CITY-ST-ZIP 4407 MUIRFIELD DR W
BRADENTON FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS ROEHL, KATRINA
CITY-ST-ZIP 2719 3RD AVENUE WEST
BRADENTON FL 34205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME T
STREET ADDRESS BRANTLEY, JEANIE
CITY-ST-ZIP 1700 3RD AVENUE W
BRADENTON FL 34205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS IRWIN, JEAN
CITY-ST-ZIP 206 2ND STREET EAST
BRADENTON FL 34208

TITLE ☐ Change ☐ 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 all other like empowered.

SIGNATURE:

MARTHA G. WOOD 41000 (941) 355-2034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)