**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 01, 2002 8:00 am Secretary of State DOCUMENT # **N95000005554** 1. Entity Name MANATEE BASEBALL CLUB, INC. 04-01-2002 90155 045 \*\*\*\*61.25 Principal Place of Business Mailing Address 1023 MANATEE AVENUE WEST 1023 MANATEE AVENUE WEST **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0625411 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HAWKINS, JOHN D 1023 MANATEE AVENUE WEST **BRADENTON FL 34205** Zip Code City 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 (NQTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. SVD TITLE ☐ Delete TITLE Change ☐ Addition HAWKINS, JOHN D NAME NAME STREET ADDRESS STREET ADDRESS 321 32 ST W CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34205 P.D. RD) Change TITLE □ Delete TITLE ☐ Addition Gregory C. Meissner MEISSNER, GREGORY C NAME NAME 1111. 3rd Ane. W. # 150 STREET ADDRESS 1111 3RD AVENUE W #150 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** Bradenton, FL 34205 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME RUGGIERO, BRIAN NAME STREET ADDRESS STREET ADDRESS 1019-85TH STREET COURT N.W. CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attach

SIGNATURE: