2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

DOCUMENT # N9600005950 1. Entity Name MANATEE RELIGIOUS SERVICES FOUNDATION, INC.						ary 01 St 3 90061 032 ****6			
Principal Place of Business 4106 18TH ST. W BRADENTON, FL 34205 Mailing Address 4106 18TH ST. W BRADENTON, FL 34205					TO CO. CO. CO.	ING BOM SOUD SWO WEEL SYN B	OMINI EL LETE		
2. Principal Pl	tace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	01042008	Chg-NP	CR2E037 (12/06)				
City & State		City & State		4. FEI Number 65-0747	905		optied For lot Applicable		
Zip	Country	Zip	Country	5. Certificate of	f Status Desired	□ \$8.75 Ac Fee Requir			
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New	Registered Agent			
Jaylo	-VIE-O	~	Name -	TAYLOR	10010		-		
TÁLOŘ, LEXIE O 3111 29TH AVE. EAST				Street Address (P.O. Box Number is Not Acceptable)					
BRADENT	ON, FL 34208		4106 18th Street West						
			City B.	radustas		FL Zip Co	de 205		
	named entity submits this statement for ions of registered agent.	r the purpose of changing its re	gistered office or re	egistered agent, or both	n, in the State of F	Rorida. Lam familiar with	i, and accept		
	Signature, typed or printed name of registered agent								
	The same, types or promote special or regulation again.	and the frappicable. (NOTE R	egistered Agent signature	e required when (sinstating)		DATE	•		
	Filing Fee is \$61.25 Due by May 1, 2008	B. Election Comp.	aign Financing	_ \$5.00 May Bo		Make check payable onda Department of I			
10.	Filing Fee is \$61.25	9. Election Campa Trust Fund Cor	aign Financing	\$5.00 May Bo	Fic	Make check payable	State		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:	KI	shi O.	Land)	Lexic	0.194/0-		941-252-4850
	BIGHATUR	E AND TYPED OR PRINT	ED HAME OF SIGHING OFFI	CER OR DIRECTOR	<i></i>	Date	Daytime Phone #