

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005988

FILED
Apr 21, 2004
Secretary of State

Entity Name: MANATEE COUNTY CITIZENS AGAINST POLLUTION, INC.

Current Principal Place of Business:

2946 WILDERNESS BLVD. EAST
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

2946 WILDERNESS BLVD. EAST
PARRISH, FL 34219

New Mailing Address:

FEI Number: 65-0789243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMARICH, DAN
2946 WILDERNESS BLVD. EAST
PARRISH, FL 34219

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: KUMARICH, DAN
Address: 2946 WILDERNESS BLVD. EAST
City-St-Zip: PARRISH, FL 34219

Title: S () Delete
Name: KUMARICH, CELE
Address: 2946 WILDERNESS BLVD. EAST
City-St-Zip: PARRISH, FL 34219

Title: T () Delete
Name: SAYERS, NEVA
Address: 3111 WILDERNESS BLVD W
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: TROXELL, CLARENCE
Address: 3321 LAKESIDE CIRCLE
City-St-Zip: PARRISH, FL 34219

Title: D (X) Delete
Name: HERBETS, STAN
Address: 3201 WILDERNESS BLVD W
City-St-Zip: PARRISH, FL 34219

Title: D (X) Delete
Name: SAYERS, PAUL
Address: 3111 WILDERNESS BLVD W
City-St-Zip: PARRISH, FL 34219

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 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 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: DAN KUMARICH

P

04/21/2004

Electronic Signature of Signing Officer or Director

Date