2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2004 8:00 am
Secretary of State
06-22-2004 90001 046 ****61.25

54058355

DOCUMENT # N97000007163

1. Entity Name
MANASOTA DIETETIC ASSOCIATION INCORPORATED

Principal Place of Business	Mailing Address
4911 AVON LANE SARASOTA, FL 34238	4911 AVON LANE SARASOTA, FL 34238

2. Principal Place of Business	3. Mailing Address
3451 Queens St.	3451 Queens St.
Suite, Apt. #, etc.: Apt 922	Suite, Apt. #, etc.: Apt 922
City & State: Sarasota, FL	City & State: Sarasota, FL
Zip: 34231 Country: USA	Zip: 34231 Country: USA

05262004 Chg-NP CR2E037 (10/03)

4. FEI Number: 65-1006115 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHAMBERS, RACHEL A
4911 AVON LANE
SARASOTA, FL 34238

7. Name and Address of New Registered Agent

Name: CHRISTINE A STAPELL
Street Address (P.O. Box Number is Not Acceptable): 1982 CAPITAL CIRCLE NE Ste C
City: TALLAHASSEE FL Zip Code: 32308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Christine A Stapell 6/17/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PED CROSS, JOYCE 6562 SPYGLASS LANE BRADENTON, FL 34202	☒ Delete	PD TRESSLER, KASEY 3451 Queens St, Apt 922 Sarasota, FL 34231	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BOWMAN, JENNIFER 758 NORTH MENASOTTA KEN RD ENGLEWOOD, FL 34223	☒ Delete	VD Wollenberg, Cheryl 1007 Marlin Lakes Circle, Apt 322 Sarasota, FL 34232	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KONDELL, LOUISE 5041 OLIVIA RD VENICE, FL 34293	☒ Delete	SD vonSuskil, Natalie 4002 Crabtree Ave. Sarasota, FL 34233	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MILLER, FLOREY 12723 ROCKROSE GLEN BRADENTON, FL 34202	☒ Delete	TD Materewicz, Linda 7090 Odom Place North Port, FL 34287	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	HIS-D Wilson, Lisa 1868 Laurel Street Sarasota, FL 34236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: Kasey L Tressler Kasey L. Tressler 6/1/04 941/400-8894
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #