

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 23, 2005 8:00 am**  
**Secretary of State**

02-23-2005 90062 044 \*\*\*\*61.25

**DOCUMENT # N98000001295**

1. Entity Name

**LITTLE MANATEE ISLES MANUFACTURED HOMEOWNERS  
ASSOCIATION, INCORPORATED**



Principal Place of Business

**2821 GULF CITY RD #7  
RUSKIN FL 33570**

Mailing Address

**2821 GULF CITY RD #7  
RUSKIN FL 33570**

**40021807**



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3504934**

Applied For

Not Applicable

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

**SNYDER, ROBERT  
2821 GULF CITY RD #7  
RUSKIN FL 33570**

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

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  
Due By May 1, 2005**

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

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	KING, BEVERLY	
STREET ADDRESS	2821 GULF CITY RD., #69	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE	AD	<input type="checkbox"/> Delete
NAME	SAVAGE, FRANK	
STREET ADDRESS	2821 GULF CITY ROAD #148	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE	RD	<input type="checkbox"/> Delete
NAME	SNYDER, ROBERT F	
STREET ADDRESS	2821 GULF CITY RD., #7	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BELL, GRETA A	
STREET ADDRESS	2821 GULF CITY RD., #17	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE	D	<input type="checkbox"/> Delete
NAME	ELLOITT, GEORGE	
STREET ADDRESS	2821 GULF CITY RD. LOT 13	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	G. RETA A. BELL	
STREET ADDRESS	2821 GULF CITY RD #17	
CITY-STATE-ZIP	RUSKIN FL 33570	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	D KING, BEVERLY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2821 GULF CITY RD #69	
STREET ADDRESS	RUSKIN FL 33570	
CITY-STATE-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:** Greta A. Bell Feb. 16/05 641-1756  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #