## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N98000001295

1. Entity Name



Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90727 046 \*\*\*\*61.25

FILED

LITTLE MANATEE ISLES	MANUFACTURED	HOMEOWNERS	ASS
OCIATION, INCORPORA	ΓED		

				SO WE IS	
Principal Place of I	Business	Mailing Address			
2821 GULF CITY RD RUSKIN FL 33570	) #7	2821 GULF CITY RD #7 RUSKIN FL 33570			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<i>,</i> .		
City & State		City & State			
Zip	Country	Zip	Coi	untry	····
6	. Name and Address of Cu	rrent Registered Agent	.1		
				Name	

☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-3504934 Applied For Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent SNYDER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 2821 GULF CITY RD #7 RUSKIN FL 33570 City 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 Make Check Payable to 9.-Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Addition KING, BEVERLY NAME NAME 2821 GULF CITY RD; #69 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 3 CITY-ST-ZIP CITY-ST-ZIP AD □ Delete TITLE ☐ Change ☐ Addition SAVAGE, FRANK NAME NAME . 2821 GULF CITY ROAD #148 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RUSKIN FL 33570 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SNYDER, ROBERT F NAME NAME 2821 GULF CITY RD., #7 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition **BELL, GRETA A** NAME NAME 2821 GULF CITY RD., #17 STREET ADDRESS STREET ADDRESS **RUSKIN FL 33570** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE X Delete TITLE HORSTMAN: MARY NAME NAME George Elloitt 2821 GULF CITY RD., #86 STREET ADDRESS STREET ADDRESS 2821 Gulf City nd., Lot 13 CITY-ST-ZIP RUSKIN FL 33570 CITY-ST-ZIP TITLE 2 Delete TITLE Change ☐ Addition SNYDER, CAROL NAME DECEASED NAME 2821 GULF CITY RD #7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **RUSKIN FL 33570** 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 directo 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 changed, or on an attachment with an address, with all other like empowered. - 813-641