FILED

20Q1 UNIFORM BUSINESS REPORT (UBR)

Feb 14, 2001 8:00 am DOCUMENT # N9800007087 Secretary of State 1. Entity Name 02-14-2001 90014 002 ****70.00 CH OF MANATEE, INC. Principal Place of Business Mailing Address 1206 MANATEE AVE..WEST 1206 MANATEE AVE..WEST 716200 **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0882541 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HARRISON, G. JOSEPH 1206 MANATEE AVE., WEST **BRADENTON FL 34205** 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. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE D, CH Delete TITLE Change Addition Richard T Conard **BURNS, BRUCE** NAME NAME WH to teir tori 1460 WEST LANE AVE. STE B STREET ADDRESS STREET ADDRESS Bradenton FL 3420A CITY-ST-ZIP COLUMBUS OH 43221 CITY-ST-ZIP TITLE DIP ☐ Change Addition Delete TITLE Betty A Conard HARRISON, G. JOSEPH NAME NAME INO TO THE FOR 1206 MANATEE AVE., WEST STREET ADDRESS STREET ADDRESS Bradenton FL 34209 BRADENTON.FL 34205 -CITY-ST-ZIP. CITY-ST-ZIP TITLE TO, VP ☐ Change Addition X Delete Scott Conard TITLE 4750 N Mac Arthur Blvd # 100 EVERS, BILL NAME NAME STREET ADDRESS Irving Tx 75039 STREET ADDRESS 211 25TH ST W **BRADENTON FL 34203** CITY-ST-ZIP CITY-ST-ZIP Kimberly Schulz TITLE 7,5 ☐ Change X Addition TITLE ☐ Delete 6224 14th St W NAME NAME STREET ADDRESS Bradenton FL34207 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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:

REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR