

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000889

1. Entity Name

Manasota Business Network, Inc.

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90064 034 ****61.25

Principal Place of Business

4301 32ND ST. W.
SUITE D1
BRADENTON, FL 34205

Mailing Address

4301 32ND ST. W.
SUITE D1
BRADENTON FL 34205

2. Principal Place of Business

1809 24TH AVE. W.
Suite, Apt. #, etc.

3. Mailing Address

1809 24TH AVE. W.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Bradenton FL

City & State

Bradenton FL

4. FEI Number

65-0894244

Applied For

Not Applicable

Zip

34205

Country

Manatee

Zip

34205

Country

Manatee

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Gargiulo, Robert G.
4301 32ND ST. W.
SUITE D1
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name
Gargiulo, Robert G.
Street Address (P.O. Box Number is Not Acceptable)
4301 32ND ST. W.
SUITE D1
City
Bradenton FL 34205

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

Robert G. Gargiulo

(NOTE: Registered Agent signature required when reinstating)

Mar 24, 2000

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	Gargiulo, E. W.	
STREET ADDRESS	4301 32ND ST. W. SUITE D1	
CITY - ST - ZIP	BRADENTON, FL 34205	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	O'Donnell, Kevin	
STREET ADDRESS	7506 Westmoreland Dr.	
CITY - ST - ZIP	SARASOTA, FL 34243	
TITLE	D	<input type="checkbox"/> Delete
NAME	Fletcher, Ken	
STREET ADDRESS	3557 - 1ST ST. E.	
CITY - ST - ZIP	BRADENTON, FL 34208	
TITLE	D	<input type="checkbox"/> Delete
NAME	Humphreys, Susan	
STREET ADDRESS	4000 Manatee Ave. W.	
CITY - ST - ZIP	BRADENTON, FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	Mills, Kim	
STREET ADDRESS	P.O. Box 14981	
CITY - ST - ZIP	BRADENTON, FL 34280	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D, P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hetcher, Ken	
STREET ADDRESS	3557, First Street E.	
CITY - ST - ZIP	BRADENTON, FL 34208	
TITLE	D, V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Klaus Baumer	
STREET ADDRESS	819 61ST ST. W.	
CITY - ST - ZIP	BRADENTON, FL 34209	
TITLE	D, S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cindi Crawford	
STREET ADDRESS	1809 24TH AVE. W.	
CITY - ST - ZIP	BRADENTON, FL 34205	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Humphreys, Susan	
STREET ADDRESS	2915 Fiddlers Bend	
CITY - ST - ZIP	PALMETTO, FL 34221	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pam Courtney	
STREET ADDRESS	4639 Cortez Rd. W.	
CITY - ST - ZIP	BRADENTON, FL 34210	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Guthrie K. Crawford Guthrie K. Crawford 3-24-00 941-746-6778

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)