

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000889

FILED
Apr 15, 2009
Secretary of State

Entity Name: MANASOTA BUSINESS NETWORK, INC.

Current Principal Place of Business:

4301 32ND STREET WEST
C-4
BRADENTON, FL 34205

New Principal Place of Business:

2915 FIDDLERS BEND
PALMETTO, FL 34221

Current Mailing Address:

4301 32ND STREET WEST
C-4
BRADENTON, FL 34205

New Mailing Address:

2915 FIDDLERS BEND
PALMETTO, FL 34221

FEI Number: 65-0894244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARGIULO, ROBERT G
4301 32ND STREET WEST
C-4
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

HUMPHREYS, SUSAN
2915 FIDDLERS BEND
PALMETTO, FL 34221 US

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: SUSAN HUMPHREYS

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LITTLEFIELD, MARSHA
Address: 10912 8TH AVE., E.
City-St-Zip: BRADENTON, FL 34212

Title: DST () Delete
Name: HUMPHREYS, SUSAN
Address: 2915 FIDDLERS BEND
City-St-Zip: PALMETTO, FL 34221

Title: DVP () Delete
Name: PARKS, JEREI E
Address: 4301 32ND STREET WEST, STE C-16
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: BERRY, LORRAINE
Address: 3780 PINEBROOK CIR. #2
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PARKER, JANE
Address: 4301 32ND STREET WEST, STE. C-2
City-St-Zip: BRADENTON, FL 34205

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: WAGNER, CHRIS
Address: 2901 MANATEE AVE W., STE 101
City-St-Zip: BRADENTON, FL 34205

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN HUMPHREYS

DTS

04/15/2009

Electronic Signature of Signing Officer or Director

Date