

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002237

1. Entity Name

MANATEE AREA CHAMBER FOUNDATION, INC.

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90117 046 ****61.25

Principal Place of Business

Mailing Address

222 10TH ST. WEST
BRADENTON FL 34206

222 10TH ST. WEST
BRADENTON FL 34205-8636

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0895630

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

BARTZ, ROBERT
222 10TH ST. WEST
BRADENTON FL 34206

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MURPHY, BRIAN DR.
STREET ADDRESS 2003 CORTEZ RD. WEST
CITY-ST-ZIP BRADENTON FL 34207 ☐ Delete

TITLE D
NAME VOGLER, EDWARD II
STREET ADDRESS 802 11TH ST. WEST
CITY-ST-ZIP BRADENTON FL 34205 ☐ Delete

TITLE D
NAME ODEN, KEN
STREET ADDRESS 4900 MANATEE AVE. WEST, STE.101
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☒ Addition
NAME Robert P. Bartz
STREET ADDRESS 222 10th St West
CITY-ST-ZIP Bradenton, FL 34205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 another like empowered.

SIGNATURE:

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

1-10-00 (941) 748-3411

Date

Daytime Phone #