2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 21, 2001 8:00 am DOCUMENT # **N99000002237** Secretary of State MANATEE AREA CHAMBER FOUNDATION, INC. 02-21-2001 90026 015 ****61.25 Principal Place of Business Mailing Address 222 10TH ST. WEST 222 10TH ST. WEST **BRADENTON FL 34206 BRADENTON FL 34206** B0017036 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0895630 Not Applicable Zip Country 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 Street Address (P.O. Box Number is Not Acceptable) BARTZ, ROBERT 222 10TH ST. WEST BRADENTON FL 34206 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition MURPHY, BRIAN DR. NAME NAME STREET ADDRESS 2003 CORTEZ RD: WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34207** ☐ Addition ☐ Delete TITLE ☐ Change TITLE VOGLER, EDWARD II NAME NAME STREET ADDRESS 802 11TH ST. WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** D Change Change Addition TITLE ☐ Delete TITLE ODEN, KEN NAME NAME 4311 Manatee AUE. WEST # 210 -4900-MANATEE AVE. WEST, STE.101-- こしつ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** D Change ☐ Addition TITLE ☐ Delete TITLE Bartz butz, robert p NAME NAME STREET ADDRESS STREET ADDRESS **222 10TH ST WEST** CITY-ST-7P 34205 CITY-ST-ZIP BRADENTON FL 34209-☐ Change TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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 attachme

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF