


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 29, 2008 8:00 am**  
**Secretary of State**

01-29-2008 90011 021 \*\*\*\*61.25

<b>DOCUMENT # N99000006277</b> 1. Entity Name <b>WE CARE MANATEE, INC.</b>					
Principal Place of Business <b>4808 26 STREET WEST BRADENTON, FL 34207</b>			Mailing Address <b>4808 26 STREET WEST BRADENTON, FL 34207</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<b>6. Name and Address of Current Registered Agent</b>  <b>HANDRA, KATHY L 4808 26 STREET WEST BRADENTON, FL 34207</b>				<b>7. Name and Address of New Registered Agent</b> Name <b>DONNA CATALINI</b> Street Address (P.O. Box Number is Not Acceptable) <b>4808 26TH STREET WEST</b> City <b>BRADENTON</b> <b>FL</b> Zip Code <b>34207</b>	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Donna Catalini</i></u> <span style="float: right;">1/18/2008</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to: Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DR MCCULLEN, JENNIFER <input type="checkbox"/> Delete 8340 LAKEWOOD RANCH BLVD SUITE 240 BRADENTON, FL 34202		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MORRISH, THOMAS <input type="checkbox"/> Delete 701 MANATEE AVE WEST BRADENTON, FL 34205		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T MATTINA, PETER MD <input type="checkbox"/> Delete 800 39TH STREET W BRADENTON, FL 34205		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HILL, G. AUSTIN <input type="checkbox"/> Delete 200 3RD AVE WEST STE 210 BRADENTON, FL 34205		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D GATLIN, LIZ <input type="checkbox"/> Delete 4808 26TH ST W BRADENTON, FL 34207		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D <input checked="" type="checkbox"/> Delete BAKER, MANDY L 5312 CORTEZ ROAD W. BRADENTON, FL 34210		TITLE NAME STREET ADDRESS CITY- ST- ZIP	vp <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JONATHAN FLEECE 802 11TH STREET W BRADENTON, FL 34205	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>[Signature]</i></u> <span style="float: right;">1/24/08</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					