UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90147 015 ***150.00

DOCUMENT # P02000021139

1. Entity Name

Manchester Partners, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2300 W. Sample Rd.	2300 W. Sample Rd.
Suite, Apt. #, etc.: 202	Suite, Apt. #, etc.: 202
City & State: Pompano Beach, FL	City & State: Pompano Beach, FL
Zip: 33073 County:	Zip: 33073 County:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0988073 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Mark Brady

Street Address (P.O. Box Number is Not Acceptable): 2300 W. Sample Rd

Suite 202

City: Pompano Beach FL Zip Code: 33073

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: _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D-P
NAME	Mark A. Brady
STREET ADDRESS	2300 W. Sample Rd
CITY-ST-ZIP	Pompano Beach, FL 33073
TITLE	D
NAME	Jacqueline M. Brady
STREET ADDRESS	2300 W. Sample Rd.
CITY-ST-ZIP	Pompano Beach, FL 33073
TITLE	
NAME	
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DO NOT WRITE IN THIS SPACE

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/26/02 954-979-9900