


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90040 033 ***158.75

| | |
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| DOCUMENT # P00000041981 |  |
| 1. Entity Name MANASOTA UNDERWRITERS OF SARASOTA, INC. | |

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| Principal Place of Business 5505 15TH ST. E. BRADENTON, FL 34203 | Mailing Address 5505 15TH ST. E. BRADENTON, FL 34203 |
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| 2. Principal Place of Business 410 CORTEZ RD | 3. Mailing Address 410 CORTEZ RD |
| Suite, Apt. #, etc. #416 | Suite, Apt. #, etc. #416 |

| | |
|--------------------------------------|--------------------------------------|
| City & State BRADENTON, FL | City & State BRADENTON, FL |
| Zip 34207 | Zip 34207 |
| Country MANATEE | Country MANATEE |

02122004 Chg-P CR2E034 (10/03)

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|---|--|
| 6. Name and Address of Current Registered Agent MOONEY, JOSEPH 5505 15TH ST. E. BRADENTON, FL 34203 | |
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| 4. FEI Number 65-1048642 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

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| 7. Name and Address of New Registered Agent | |
| Name JOSEPH MOONEY | |
| Street Address (P.O. Box Number is Not Acceptable) 410 CORTEZ RD #416 | |
| City BRADENTON | FL Zip Code 34207 |

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| 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 <i>Joseph D. Mooney</i> | DATE 2-11-04 |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---------------------------------|---|--|
| TITLE D | <input type="checkbox"/> Delete | TITLE P&D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME MOONEY, JOSEPH | | NAME JOSEPH MOONEY | |
| STREET ADDRESS 5505 15TH ST. E. | | STREET ADDRESS 410 CORTEZ RD | |
| CITY-ST-ZIP BRADENTON, FL 34203 | | CITY-ST-ZIP BRADENTON, FL 34207 | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

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| 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 607, 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 empowers. | |
| SIGNATURE: <i>Joseph D. Mooney</i> | DATE 2-11-04 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | |

(941) 812-0302
Daytime Phone #