

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90132 007 ***150.00

DOCUMENT # P05000055658					
1. Entity Name EVERGLADES MANATEE STATION, INC					
Principal Place of Business 25000 TAMiami TRAIL E NAPLES, FL 34114 US			Mailing Address 12693 TAMiami TRAIL E. NAPLES, FL 34113 US		
2. Principal Place of Business - No P.O. Box # 220 Goodland Drive		3. Mailing Address P.O. Box 127			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Goodland, FL		City & State Goodland, FL		4. FEI Number 20-2687432	
Zip 34140		Country U.S.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BROWNLEE, JEROME 12693 TAMiami TRAIL E NAPLES, FL 34113			7. Name and Address of New Registered Agent Name: <u>Jerome Brownlee</u> Street Address (P.O. Box Number is Not Acceptable): <u>338 NEWPORT DRIVE APT 1806</u> City: <u>Naples</u> FL Zip Code <u>34114</u>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P.S. NAME BROWNLEE, JEROME STREET ADDRESS 12693 TAMiami TRAIL E CITY-ST-ZIP NAPLES, FL 34113	<input type="checkbox"/> Delete		TITLE P.S. <u>Jerome Brownlee - Pres./Sec</u> NAME <u>338 NEWPORT DRIVE APT 1806</u> STREET ADDRESS <u>Naples, FL 34114</u> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME BROWNLEE, JUDD J STREET ADDRESS 12693 TAMiami TRAIL E. CITY-ST-ZIP NAPLES, FL 34113	<input type="checkbox"/> Delete		TITLE VP <u>Judd Brownlee</u> NAME <u>3340 LAKE SUTTON DR</u> STREET ADDRESS <u>LAKE O LAKEs, FL 34639</u> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 its 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 empowered.					
SIGNATURE: <u>Jerome Brownlee - Pres</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/30/08</u> Daytime Phone #: <u>239-839-3735</u>		