

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90086 025 ***150.00

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1. Entity Name

MANATEE ORANGE GROVE, INC.



Principal Place of Business

40 WALL STREET
NEW YORK, NY 10005

Mailing Address

C/O BERNARD J. WALD
40 WALL STREET, SUITE 5400
NEW YORK, NY 10005

40033150



02262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-3541016

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM INC
1200 S PINE ISLAND RD
PLANTATION, FL 33324

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME WALD, BERNARD J
STREET ADDRESS 40 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE P
NAME WALD, BERNARD J
STREET ADDRESS 40 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE VP
NAME CERESNEY, IAN
STREET ADDRESS 40 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE T
NAME WALD, BERNARD J
STREET ADDRESS 40 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE S
NAME CERESNEY, IAN
STREET ADDRESS 40 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 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:

B. J. Wald Pres. Bernard J. Wald 2/27/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #