




FILED
Apr 07, 2005 8:00 am
Secretary of State

04-07-2005 90018 033 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P40749 1. Entity Name MANATEE TOWN CENTER, INC.		
Principal Place of Business 2525 N LIMESTONE ST SUITE 102-202 SPRINGFIELD, OH 4553-45503 US		Mailing Address 2525 N LIMESTONE ST SUITE 102-202 SPRINGFIELD, OH 4553-45503 US
2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.	
City & State Zip	City & State Zip	4. FEI Number 31-1342971 Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent VALENTINE, JAMES E. 701 11TH STREET SOUTH UNIT # 18 NAPLES, FL 34102		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2401 GULF SHORE BLVD N #8 City NAPLES, FL Zip Code 34103
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>Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP CRABILL, CHARLES P. <input type="checkbox"/> Delete 2490 SIGNAL HILL RD. SPRINGFIELD, OH	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC VALENTINE, JAMES E. <input type="checkbox"/> Delete 701 11TH STREET SOUTH UNIT # 18 NAPLES, FL 34102	DVS VALENTINE, JAMES E. <input type="checkbox"/> Change <input type="checkbox"/> Addition 2401 GULF SHORE BLVD N#8 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS VALENTINE, JAMES E. <input type="checkbox"/> Delete 701 11TH STREET SOUTH UNIT # 18 NAPLES, FL 34102	VPS VALENTINE, JAMES E. <input type="checkbox"/> Change <input type="checkbox"/> Addition 2401 GULF SHORE BLVD N#8 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CRABILL, CHARLES P. <input type="checkbox"/> Delete 2490 SIGNAL HILL RD. SPRINGFIELD, OH	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 empowered.		
SIGNATURE: 		Date: 2/24/05
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>

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