

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P94000006310

The Manasota Herpetological Society Inc.

Principal Place of Business

Mailing Address

13615 4th Ave N.E.
Bradenton FL 34202

same.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0549337

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

John J. Schmitt
13615 4th Ave N.E.
Bradenton FL 34202

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

[Signature] Secretary

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP John J. Schmitt
NAME 13615 4th Ave N.E.
STREET ADDRESS Bradenton FL 34202
CITY-ST-ZIP

☒ Delete

TITLE DV Michael Greathouse
NAME 8034 56th Ct E
STREET ADDRESS Parrish FL 34222
CITY-ST-ZIP

☒ Delete

TITLE DS Tim Thomas
NAME 725 Sesame St
STREET ADDRESS Engelwood FL
CITY-ST-ZIP

☒ Delete

TITLE DT Sylvia Gardner
NAME 309 Hills Rd
STREET ADDRESS Nokomis FL
CITY-ST-ZIP

☒ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE DP Kevin Kuchelcki
NAME 1525 Heberling Ave
STREET ADDRESS North Port FL 34286
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE DV Tom Mayers
NAME P.O. Box 64
STREET ADDRESS Longboat Key FL 34228
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE DS Larry Lemon
NAME 1619 51st Ave E
STREET ADDRESS Bradenton FL 34203
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE DT John Schmitt
NAME 13615 4th Ave N.E.
STREET ADDRESS Bradenton FL 34202
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] John J. Schmitt

8/17/00 941-746-4964

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

00 SEP 18 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1



P94000006310

The Manasota Herpetological Society

P.O. Box 20381

Bradenton, Florida 34203



(2)

To Buck Kohr
Department of Corporations

From John Schmitt
Manasota Herpetological Society

Dear Mr. Kohr:

I wanted to thank you for your assistance in forwarding a blank Corporate Status Report to me so quickly. No one in the Society realized that we never received one this year until the delinquency notice arrived. All matters of this sort have always been handled in a timely manner by our bookkeeper before. I trust that this brings us to a current and up to date status with your department.

Once again, thank you for your assistance

John Schmitt
Treasurer

Manasota Herpetological Society Inc.