## FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 22, 2002 8:00 am Secretary of State DOCUMENT # P94000026837 1. Entity Name 05-22-2002 90083 050 \*\*\*150.00 MANATEE WORLD, INC. Principal Place of Business Mailing Address 5605 PALM BEACH BLVD 5605 PALM BEACH BLVD 80110251 FT MYERS FL 33905 FT MYERS FL 33905 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0494912 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required\_\_\_\_\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TINDER, DAVID L Street Address (P.O. Box Number is Not Acceptable) 21970 N RIVER RD ALVA FL 33920 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE □ Delete TITLE NAME TINDER, DAVID L NAME Tom Pounter 2331 Queen Anne Ave STREET ADDRESS **21970 N RIVER RD** STREET ADDRESS CITY-ST-ZIP ALVA FL 33920 CITY-ST-ZIP FORT MYERS, FL 33905 TITLE ☐ Delete TITLE Change Addition Lanic Pounter NAME Ruedi, Dieter NAME STREET ADDRESS STREET ADDRESS 2331 QUEEN PO BOX 191 CITY-ST-ZIF **ALVA FL 33920** 33905 Delete TITLE Change ☐ Addition NAME TINDER, VICKY \$ NAME STREET ADDRESS 21970 N RIVER RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALVA FL 33920 TITLE 🞾 Delete TITLE Change ☐ Addition NAME PRICE, CATHY L NAME STREET ADDRESS 2250 MARINA PARK DR STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33905 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE

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 supplied ental 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 of trustee employeered 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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

□ Delete

Addition

☐ Change