

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 16, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000026837**

1. Entity Name  
**MANATEE WORLD, INC.**



Principal Place of Business  
**5605 PALM BEACH BLVD  
FT MYERS, FL 33905 US**

Mailing Address  
**5605 PALM BEACH BLVD  
FT MYERS, FL 33905 US**

**DO NOT WRITE IN THIS SPACE**



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0494912**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**TINDER, DAVID L  
21970 N RIVER RD  
ALVA, FL 33920**

**DO NOT WRITE  
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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	TINDER, DAVID L
STREET ADDRESS	21970 N RIVER RD
CITY-ST-ZIP	ALVA, FL 33920
TITLE	VD
NAME	RUEDI, DIETER
STREET ADDRESS	PO BOX 191
CITY-ST-ZIP	ALVA, FL 33920
TITLE	T
NAME	POYNTER, TOM
STREET ADDRESS	2331 QUEEN ANNE AVENUE
CITY-ST-ZIP	FORT MYERS, FL 33905
TITLE	S
NAME	MURPHY, JUDY L
STREET ADDRESS	4701-14 LAKESIDE CLUB BLVD.
CITY-ST-ZIP	FORT MYERS, FL 33905
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/16/05-80066-020 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**DAVID L. TINDER**

**3/14/05**

**839-  
694-  
4042**