## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CHY-ST-Zer

appears in Block 12 or Block 13

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 11 1997 8:00am

Secretary of State

407 255 9323

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000035207 (7)** 

MANATEE FINANCE OF MELBOURNE, INCORPORATED

100 HIBISCUS STREET 100 HIBISCUS STREET MELBOURNE FL 32935 MELBOURNE FL 32935-4115 3. Date Incorporated or Qualified 3a. Date of Last Report 05/10/1994 04/15/1996 2. Principal Flace of Business 2a. Mailing Address 4. FEI Number Applied For 2745 TURTLE MOUND RD 2745 TURTLEMOUND RD 59-3211232 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing FL ME LBOURNE FL MEZBOURNE 23 28 Trust Fund Contribution Added to Fees Country Country Zin 8. This corporation has liability for intangible tax under s. 199.032, 32934 32934 25 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name S WAYNE MANN 2745 TURTLEMOUND RD 82 Street Address (P.O. Box Number is Not Acceptable) MELBOURNE FL 32934 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with, and accept the obligations of Section 607.0505, Florida Statutes. Stgriature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE THE 1.1 TITLE Change Addition ROSS, DANNIE R NAME 1.2 NAME 100 HIBISCUS STREET STREET ADORESS 1.3 STREET ADDRESS **MELBOURNE FL 32935** DITY-S1-7/P 1.4 CITY-ST-ZIP THE D DELETE Addition 2.1 TITLE Change MANN, S. WAYNE NAME 2.2 NAME 100 HIBISCUS STREET STREET ADDRESS 2.3 STREET ADDRESS **MELBOURNE FL 32935** CITY-ST 7/P 2.4 CITY-ST-ZIP DELETE DIRECTOR 1:11.6 31 TITLE Change Addition NAME 32 NAME MARILYN H. MANN 2745 TURTLE MOUND RD. STREET ADDRESS 3.3 STREET ADDRESS MELBOURNE FL 32934 CITY - ST - ZiC 3 4. CITY - ST- ZIP DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-70 4.4 CITY - ST - ZIP DELETE Change Title 5.1 TITLE Addition MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY+S1+Zit 5.4 CITY - ST - ZIP DEFELE TITLE 61 DILE Addition NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or clirector of the concention or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

14. I do 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

attachment with an address.