


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

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| DOCUMENT # P94000085044 | |  |
| 1. Entity Name MANATEE SERVICES, INC. | | |

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|---|---|
| Principal Place of Business P.O. BOX 936 PALMETTO, FL 34220 | Mailing Address P.O. BOX 936 PALMETTO, FL 34220 |
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DO NOT WRITE IN THIS SPACE



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|---|----------|--------------------------------|
| 04182006 | No Chg-P | CR2E034 (11/05) |
| 4. FEI Number 65-0538157 | | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent DURYEA, DUANE 502 6TH AVENUE DRIVE WEST PALMETTO, FL 34221 |
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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD MCCLURE, DANIEL P 4820 RIVERVIEW BLVD BRADENTON, FL 34209 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVPS MCCLURE, CORRINE 4820 RIVERVIEW BLVD. BRADENTON, FL 34209 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV MCCLURE, DANIEL CARR 502 6TH AVE. WEST PALMETTO, FL 34221 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST DURYEA, DUANE 4403 24TH AVE E PALMETTO, FL 34221 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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05/03/06-80081-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Duane Duryea - Duane Duryea Treasurer 4/19/06 (941) 722-4545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deyenne Figure 4