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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000053007

MANATEE SALVAGE, INC.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90099 006 ***150.00



							<u> </u>			(A 41 4) 1441 1441
Principal Place	of Business	Mailing Ad	dress				1 (281) 981 110 121111111111111111111111111111111			
108 25TH STREE	ET WEST	109 25TH S	STREET WEST							
BRADENTON FL		BRADENTO	BRADENTON FL 34205				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed	TE IIV TINO		
							07/06/1995			
		0- 14-00-4	. Add			•	4. FEI Number			Applied For
— ·	ace of Business	— <u>⊢</u>	2a. Mailing Address							Not Applicable
21		26	The state of the s				65-0596191			
Suite, Apt. #	#, etc.	27 Suite, 1	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	3 5 5 5 5 5 7 7 7 7 7 7	City &	City & State				6. Election Campaign Financing			May Be
23		28	The state of the s				Trust Fund Contribution			d to Fees
Zip	Country	Zip	-	Cou	ntry		8. This corporation owes the curr	ent year Inta		
24	25		30				Personal Property Tax. Yes No			□No
	9. Name and Address of Curr	ent Registered A	gent		ļ.,		10. Name and Address of New I	Registered /	gent	
					81	Name				
	ERS, JEROME J 25TH STREET WEST		İ			Street Addr	ess (P.O. Box Number is Not Acceptable)			
	DENTON FL 34205					-				
OTIAL	DEITHORTE GAZOG				83					
					84	City		FL	85 Zip	p Code
44 5	- N isiana of Cartings 607.01	502 and 607 1609	Elorido Statuto	e the a	bove	-named corn	oration submits this statement for the	purpose of	changing i	its registered
office or re	egistered agent, or both, in the Stat	e of Florida. Sucr	i cnange was au	Jinonzei	ועסג	tne corporation	on's board of directors. I hereby acce	pt the appoir	tment as	registered
agent. I ar	n familiar with, and accept the obli	gations of, Section	1 6 07.0505, Flor	ida Stat	utes.					
SIGNATURE			HOTE	Di sistema	A	4 -iti	d when reinstating)	DATE		
12.	Signature, typed or printed name of registered a	AND DIRECTORS		13.	Agen	t signature require	ADDITIONS/CHANGES TO OF		D DIREC	TORS IN 12
		AND DIRECTORS	, □ DELETE	1.1 Ti	ΠE		ADDITIONOLO LI LICENTI		☐ Change	
TITLE	PST POWERS I			1.2 N						}
NAME	POWERS, JEROME J.					ADODESS				
STREET ADDRESS	1					ADORESS				ł
CITY-ST-ZIP	BRADENTON FL 34205		_	1.4 CITY-ST-ZIP 2.1 TITLE		·		☐ Change	e Addition	
TITLE	-									
NAME	POWERS, KATHLEEN M.			2.2 N						
STREET ADDRESS	108 25TH STREET WEST					ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205				ITY-S	T-ZIP			∽[⊡] Chang	e Addition
TILE	The water of		DELETE ~	3.1 T						
NAME				3.2 N						
STREET ADORESS	1			3.3 \$	TREET	ADDRESS				
CfTY-\$T-ZIP	,			_	ITY-S	T-ZIP				
TITLE			☐ DELETE	4.1 T	TLE				Change	e Addition
NAME				4.21	IAME					j
STREET ADDRESS	s.			4.3 S	TREET	ADDRESS				ł
CITY-ST-ZIP				4.4 C	ITY-S1	T-ZIP				
TITLE			□ DELETE	5.1 T	TLE				Chang	je 🗀 Addition
NAME .				5.2 N	AME					
STREET ADORESS				5.3 S	TREET	ADDRESS				
CITY-ST-ZIP				5.4 C	ITY-S1	T-ZIP				
TITLE		1-80-ann	☐ DELETE	6.1 T	TLE.	1			☐ Chang	je 🔲 Addition
NAME				6.2 N	AME					
STREET ADDRESS		J		6.3 \$	TREET	ADDRESS				

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on any adjocument with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE