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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000092794 (3)

MANATEE HOME COMPANIONS, INC.

Principal Place of Business 2701 MANATEE AVENUE, WEST SUITE D		Mailing Address 2701 MANATEE AVENUE: -SUITE D-		,,,, <u>,,</u> ,,			
BRADENTON FL-34205-		BRADENTON FL 34205-45	152~~		3. Date Incorporated or Qualified 3a. Date 01/01/1996	of Last Rep	port
2. Principa' Place of Business		2a. Mailing Address	·		. 4. FEI Number	Anc	olied For
	ST W	26 116 75	51	Wes	st 165-0643007		Applicable
Suite, Apt. #, etc.	<u> </u>	Suite, Apt. #, etc.				\$8.75 AC	
22		27				Fee Req	
City & State 23 Bradentor		City & State 28 Bradento		<u>L</u>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	Fees
□ 2H 2NQ □	Country	7p24209	Cour	"SA	8. This corporation has liability for intangible ta: Florida Statutes		199.032,
24 37 209 25 9 Name and	Address of Current	Registered Agent	30 (NUM	Fiorida Statutes Yes 10. Name and Address of New Registered Ap		
TALBOT, KRISTEN				81 Name			
2701 MANATEE AV SUITE B BRADENTON FL 34	·			83	Address (P.O. Box Number is Not Acceptable)	AT 17:00	
				Bro	adenton FL	85 Zip Ci	no no
 office or registered agent. 	or both, in the State o	and 607.1508, Florida Stati of Florida. Such change was tions of, Section 607.0505, F	authorized	by the corp	corporation submits this statement for the purpose of cl poration's board of directors. I hereby accept the appoin	nanging its itment as re	registered egistered
SIGNATURE Source to the transfer of the	mred more of registered agen	t and title d'aculmable (NC	DIF: Repistered	Agent signature	e required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS	IN 12
TITLE D		☐ DELETE	1.1 TITI	.f	(Address)	\$ Change	Addition
NAME TALBOT, KRI			1.2 NA		11 15 Street West		
PRACEITAN	EE AVE., W., SUITI	F-0	. 1	EET ADDRESS	116 15 Street West Bradenton, FL 34209		
CRY-SI-ZIF BRADENTON	TE 04200	☐ DELETE	1.4 CIT 2.1 TIT	Y-ST-ZIP		Change	Addition
NAME		<u> </u>	2.2 NA	į	ļ	a change	
STREET ADDRESS				EET ADDRESS			
CITY - S1 - ZIP				Y-ST-ZIP			
TITLE		DELETE	31 117	.E		Change	Addition
NAME			3 2 NAI	AE			
STREET ADDRESS			3.3 STF	EET ADDRESS			ĺ
City-ST-ZiP				Y-ST-ZIP		7	*
TifLE		L_] DELETE	4.1 (1)		<u></u>	_l €hange	Addition
NAME			4. 2 NA				ļ
STREET ADDRESS				EET AODRESS			
C/TY-ST-7/P	v	DELETE		Y-ST-ZIP		Change	Addition
THIE		F) nercit	5.1 TIT 5.2 NAI	-	L-1	T ANNUAL	T Vontion
NAME STORES ADDRESS I				NEET ADDRESS			ļ
STREET AODRESS			1	Y-ST-ZIP			
CRY ST-7P TITLE		DELETE	54 UT		T.	Change	Addition
NAME		the state of the s	6.2 NA]		
STREET ADORESS				EET ADDRESS			
CITY-ST-ZIP			1	Y-ST-ZIP			
14. I do hereby certify that the	information supplied	with this filing does not app	lify for the o	exemption s	stated in Section 119.07(3)(i), Florida Statutes. I further of	ertify that th	he
Lam an officer or director	of the corporation or	upplemental annual report is the receiver or trustee enjoy on an altachment with all as	wered to e	ccurate and recute this r	d that my signature shall have the same legal effect as if report as required by Chapter 607, Florida Statutes; and	that my na	er oaur; that i

SIGNATURE:

FILED

Feb 25 1997 8:00am

Secretary of State