

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000014116

1. Entity Name

MANATEE PROPERTY MANAGEMENT, INC.

Principal Place of Business

309 LAKE AVENUE
LAKE WORTH FL 33460

Mailing Address

309 LAKE AVENUE
LAKE WORTH FL 33460

2. Principal Place of Business

MANATEE PROPERTY MANAGEMENT, I

303 Lake Avenue
Lake Worth, FL 33460

MANATEE PROPERTY MANAGEMENT, INC.

303 Lake Avenue
Lake Worth, FL 33460

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90060 030 ***550.00



DO NOT WRITE IN THIS SPACE

1. FEI Number

65-0643279

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOURMAIS, PATRICIA ESQ.
303 LAKE AVENUE
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D LOURMAIS, PATRICIA
STREET ADDRESS 309 LAKE AVENUE
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE ☐ Delete
NAME D WASHBURN, SCOTT
STREET ADDRESS 309 LAKE AVENUE
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME PATRICIA LOURMAIS
STREET ADDRESS 303 LAKE AVE
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE ☒ Change ☐ Addition
NAME SCOTT WASHBURN
STREET ADDRESS 303 LAKE AVE
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-18-00 (56) 541-5569
Date Daytime Phone #

CR2E034 15/001