

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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90201 029 ***150.00

DOCUMENT # P96000102591

1. Corporation Name

MANATEE MOLDING, INC.

Principal Place of Business

1241 TALLEVAST ROAD
SARASOTA FL 34243

Mailing Address

1241 TALLEVAST ROAD
SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1997

4. FEI Number

65-0719590

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 County

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~AMERICAN LAWYER CHARTERED~~
~~643 ALMERIA AVENUE~~
~~CORAL GABLES FL 33134~~

81 Name

Dale Avery

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

1241 Tallevast Road

83

84 City

Sarasota

FL

85 Zip Code
34243

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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Dale R. Avery*

VPD

Dale R. Avery

04-19-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPD ☐ DELETE
NAME AVERY, DALE R
STREET ADDRESS 1241 TALLEVAST ROAD
CITY-ST-ZIP SARASOTA FL 34243

1.1 TITLE V/D ☐ Change ☐ Addition
1.2 NAME Avery, Dale R.
1.3 STREET ADDRESS 1241 Tallevast Road
1.4 CITY-ST-ZIP Sarasota, FL 34243

TITLE ~~VP~~ ☒ DELETE
NAME Kelly, George
STREET ADDRESS 1241 Tallevast Road
CITY-ST-ZIP Sarasota, FL 34243

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME MAGERS, B E
STREET ADDRESS 1241 Tallevast Road
CITY-ST-ZIP Sarasota, FL 34243

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE STD ☐ DELETE
NAME MAGERS, L M
STREET ADDRESS 1241 Tallevast Road
CITY-ST-ZIP Sarasota, FL 34243

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 indicate I 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 an attachment with an address, with all other like empowered.

SIGNATURE: *Brent E. Magers*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brent E. Magers

04-19-99

(727) 443-2673

Date

Daytime Phone #

CR2E034 (11/98)