

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90105 037 \*\*\*150.00

**DOCUMENT # P98000005125**

**1. Entity Name**  
**MANATEE TRANSPORTATION AUTHORITY, INC.**

**Principal Place of Business**

**327 LAKE ARBOR DRIVE**  
**PALM SPRINGS FL 33461**

**Mailing Address**

**327 LAKE ARBOR DRIVE**  
**PALM SPRINGS FL 33461**

**2. Principal Place of Business**

**3250 N. Federal Hwy**

Suite, Apt. #, etc.

**#2**

City & State

**Delray Beach**

Zip

**33435**

Country

**Palm Beach**

**3. Mailing Address**

**P.O. Box 980**

Suite, Apt. #, etc.

City & State

**Bonnton Beach**

Zip

**33425**

Country

**Palm Beach**



DO NOT WRITE IN THIS SPACE

**4. FEI Number**

**65-0807424**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75** Additional  
 Fee Required

**6. Name and Address of Current Registered Agent**

**KOCHERSPERGER, RICHARD PRES**  
**327 LAKE ARBOR DRIVE**  
**PALM SPRINGS FL 33461**

**7. Name and Address of New Registered Agent**

**Richard Kochersperger Pres.**  
 Street Address (P.O. Box Numbers Not Acceptable)  
**1350 Crest Dr**  
 City  
**Lake Worth** FL Zip Code  
**33461**

**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** **Richard Kochersperger Pres.**  
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**8-29-02**

**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, 2002 Fee 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** **PD** ☐ Delete  
**NAME** **KOCHERSPERGER, RICHARD**  
**STREET ADDRESS** **327 LAKE ARBOR DRIVE**  
**CITY-ST-ZIP** **PALM SPRINGS FL 33461**

**TITLE** **TRES** ☒ Delete  
**NAME** **KOCHERSPERGER, INGRID M TRES**  
**STREET ADDRESS** **327 LAKE ARBOR DR.**  
**CITY-ST-ZIP** **PALM SPRINGS FL 33461**

**TITLE** ☐ Delete  
**NAME** **SECY**  
**STREET ADDRESS** **KOCHERSPERGER, KATHERINE H SEC'Y**  
**CITY-ST-ZIP** **5805 S.37TH STREET GREENACRES FL 33463**

**TITLE** ☐ Delete  
**NAME** **VP**  
**STREET ADDRESS** **BUTLER, DIANA VP**  
**CITY-ST-ZIP** **3250 NO. FEDERAL HWY DELRAY BEACH FL 33435**

**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**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☒ Change ☐ Addition  
**NAME** **Pres. Katherine H. Kochersperger**  
**STREET ADDRESS** **5805 S. 37th Street**  
**CITY-ST-ZIP** **Greenacres, FL. 33463**

**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:** **DIANA C. BUTLER** **8/29/02 (561) 737-6101**

CR2E034 (4/02)



P.O. Box 980

Boynton Beach, FL

33425-0980

Attachment 9808e2

#19800005125

Florida Dept. of State  
Division of Corporations.

To whom it may concern,

As you can see, we have changed  
not only our physical address,  
but also our mailing address.

As a result, we did not receive  
our UBR.

Thank you,

Diana C Butler

Diana C Butler, V.P.  
Manatee Transportation Authority, Inc.