

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000040665

1. Entity Name

MANATEE POOL MANAGEMENT INC.

Principal Place of Business

9010 61ST AVE. DR. E.  
BRADENTON FL 34202

Mailing Address

9010 61ST AVE. DR. E.  
BRADENTON FL 34202

2. Principal Place of Business

7040 15 ST. E.

Suite Apt. #, etc.

#5

3. Mailing Address

7040 15 ST. E.

Suite Apt. #, etc.

#5

City & State

JARASOTA, FL.

City & State

JARASOTA, FL.

Zip

34243

Country

JARASOTA

Zip

34243

Country

JARASOTA

6. Name and Address of Current Registered Agent

PAGE, ROY H

9010 61ST AVE. DR. E.

BRADENTON FL 34202

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

ROY H. PAGE JR. PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-10-2001

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 \$150.00

After MAY 1, 2001 Fee will be \$550.00

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
PAGE, ROY H  
9010 61ST AVE. DR. E.  
BRADENTON FL 34202

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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:

ROY H. PAGE JR. PRESIDENT

Date

Daytime Phone #

1-10-2001 941-239-5082

FILED

Jan 22, 2001 8:00 am  
Secretary of State

01-22-2001 90031 007 \*\*\*150.00

605773



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)