

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000065135

FILED  
May 31, 2002 8:00 AM  
Secretary of State

Entity Name: MANATEE DREAMS, INC.

## Current Principal Place of Business:

4311 FERN CREEK DR  
JACKSONVILLE, FL 32277 US

## New Principal Place of Business:

## Current Mailing Address:

4311 FERN CREEK DR  
JACKSONVILLE, FL 32277 US

## New Mailing Address:

FEI Number: 59-3527475

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITE, SHARON F  
50 N. LAURA STREET  
SUITE 2800  
JACKSONVILLE, FL 32202

## Name and Address of New Registered Agent:

WHITE, SHARON F  
4311 FERN CREEK DRIVE  
JACKSONVILLE, FL 32277

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:

05/31/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: WHITE, SHARON F  
Address: 4311 FERN CREEK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VS ( ) Delete  
Name: WHITE, CHARLES R  
Address: 4311 FERN CREEK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON F. WHITE

PTD

05/31/2002

Electronic Signature of Signing Officer or Director

Date