## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Apr 28, 2003 8:00 am Secretary of State P98000105661 **DOCUMENT #** 04-28-2003 91881 001 \*1,200.00 1. Entity Name BEGLEY'S MANATEE SERVICES, INC. Principal Place of Business 3401 MANATEE AVENUE WEST Mailing Address 5303 14TH STREET WEST **BRADENTON FL 34205 BRADENTON FL 34207** 2. Principal Place of Business 3. Mailing Address AVE W 5818 Manatee Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0882936 テレ BRAGENTON Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired **३५३**०९ USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PERRON, ANDRE R ESQ. Street Address (P.O. Box Number is Not Acceptable) OZARK & PERRON, P.A. 2808 MANATEE AVENUE WEST **BRADENTON FL 34205** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE ☐ Addition ☐ Delete BEGLEY, ANTHONY J SR NAME NAME 6415 FORRESTER DR STREET ADDRESS STREET ADDRESS **BRADENTON FL 34202** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition BEGLEY, FRED P NAME NAME 1811 78TH ST W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: