## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000048007

Entity Name: TAKE CARE OF MANATEE, INC.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6156 STATE ROAD 70 EAST 6146 STATE ROAD 70 EAST BRADENTON, FL 34203 BRADENTON, FL 34203

Current Mailing Address: New Mailing Address:

3982 BEE RIDGE RD. 6146 STATE ROAD 70 EAST SARASOTA, FL 34233 BRADENTON, FL 34203

FEI Number: 65-0931131 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WISE, SUSANNE

1429 WESTBROOK DR.

SARASOTA, FL 34231 US

WISE, SUSANNE

7508 COVE TERRACE

SARASOTA, FL 34231 US

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: SUSANNE S. WISE, RN, MBA 02/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 WISE, SUSANNE
 Name:
 WISE, SUSANNE

 Address:
 7508 COVE TERRACE
 Address:
 7508 COVE TERRACE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

Title: VPS ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 WISE, CARL A
 Name:
 WISE, CARL A

 Address:
 7508 COVE TERRACE
 7508 COVE TERRACE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

 Name:
 WISE, SUSANNE S
 Name:
 WISE, SUSANNE S

 Address:
 7508 COVE TERR
 Address:
 7508 COVE TERRACE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUSANNE S. WISE, RN, MBA P 02/24/2009