

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004052

Entity Name: MANATEE TECHNICAL INSTITUTE FOUNDATION, INC.**Current Principal Place of Business:**6305 STATE ROAD 70 EAST
BRADENTON, FL 34203**Current Mailing Address:**6305 STATE ROAD 70 EAST
BRADENTON, FL 34203 US**FEI Number: 30-0096001****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CONARD, RICHARD
1707 71ST ST NW
BRADENTON, FL 34209 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name CONARD, RICHARD T
Address 1707 71 STREET NW
City-State-Zip: BRADENTON FL 34209

Title PRES
Name ZIEMNICKI, JOHN
Address 4301 32 STREET W.
City-State-Zip: BRADENTON FL 34205

Title D
Name SUTTON, CLAYTON
Address 4724 53RD AVE. E.
City-State-Zip: BRADENTON FL 34203

Title D
Name SPIRTAS, NEIL
Address 222 10TH ST. W.
City-State-Zip: BRADENTON FL 34205

Title VP
Name SUNSERI, BRION
Address 3911 GOLF PARK LOOP
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name CARPENTER, KAREN
Address 215 MANATEE AVENUE WEST
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name CHAPPIE, JOHN
Address PO BOX 1000
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR
Name HYDEN, TIM
Address 3200 LAKEWOOD RANCH BLVD.
City-State-Zip: BRADENTON FL 34211

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN ZIEMNICKI**PRESIDENT****03/05/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEE, BILL
Address 4760 US 41
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name STOCKTON, EARL
Address 1600 KEN THOMPSON PARKWAY
City-State-Zip: SARASOTA FL 34236