2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003577

FILED Apr 19, 2007 Secretary of State

Entity Name: CORE CITY BUSINESS INCUBATORS, INC.

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

1225 W. BEAVER ST JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

1131 LAURA STREET JACKSONVILLE, FL 32206

FEI Number: 59-3679602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BRYANT, MICHAEL L

1131 LAURA STREET

JACKSONVILLE, FL 32206 US

LEE III, ROBERT V III

1131 LAURA STREET

JACKSONVILLE, FL 32206 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: ROBERT V LEE III 04/19/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COC () Delete Title: () Change () Addition Name: ROBBINS, GEORGE Name:

 Name:
 ROBBINS, GEORGE
 Name:

 Address:
 12550 MANDARIN ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

Title: D () Delete Title: COC (X) Change () Addition

 Name:
 GASTON, ED
 Name:
 THOMAS, HENRY JR

 Address:
 2513 CHESTNUT SPRINGS LANE
 Address:
 2933 N MYRTLE ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:
 JACKSONVILLE, FL 32209

Title: COC () Delete Title: DT (X) Change () Addition Name: JOHNSON, HENRY Name: BLUM, FREDERICK M

Address: 2933 NORTH MYRTLE AVENUE Address: 3740 BEACH BLVD. SUITE 307
City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32207

Title: DT () Delete Title: DS (X) Change () Addition

Name:BRYANT, MICHAEL LName:BONNETTE, JOANAddress:1131 LAURA STREETAddress:105 TIFFANY COURTCity-St-Zip:JACKSONVILLE, FL 32206City-St-Zip:JACKSONVILLE, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE ROBBINS D 04/19/2007