

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003577

FILED
Apr 23, 2008
Secretary of State

Entity Name: CORE CITY BUSINESS INCUBATORS, INC.

Current Principal Place of Business:

1225 W. BEAVER ST
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

1131 LAURA STREET
JACKSONVILLE, FL 32206

New Mailing Address:

1131 N. 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:

LEE III, ROBERT V III
1131 LAURA STREET
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: COC () Delete
Name: ROBBINS, GEORGE
Address: 12550 MANDARIN ROAD
City-St-Zip: JACKSONVILLE, FL 32223

Title: COC () Delete
Name: THOMAS, HENRY JR
Address: 2933 N MYRTLE ROAD
City-St-Zip: JACKSONVILLE, FL 32209

Title: DT () Delete
Name: BLUM, FREDERICK M
Address: 3740 BEACH BLVD. SUITE 307
City-St-Zip: JACKSONVILLE, FL 32207

Title: DS () Delete
Name: BONNETTE, JOAN
Address: 105 TIFFANY COURT
City-St-Zip: JACKSONVILLE, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCOC (X) Change () Addition
Name: BLUM, FREDERICK
Address: 2930 SANDY BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: DCOC (X) Change () Addition
Name: THOMPSON, DEBORAH
Address: 1725 OAKHURST AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: DT (X) Change () Addition
Name: WHITAKER, JOE
Address: 4034 RIVER VALLEY ROAD S
City-St-Zip: JACKSONVILLE, FL 32277

Title: DS (X) Change () Addition
Name: JOHNSON, IVY
Address: 117 WEST DUVAL STREET, SUITE 335
City-St-Zip: JACKSONVILLE, FL 32202

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

SIGNATURE: FREDERICK BLUM

DCOC

04/23/2008

Electronic Signature of Signing Officer or Director

Date