

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00381 (6)

1. Corporation Name

**BUSINESS DEVELOPMENT CORPORATION OF SOUTHWEST FL
ORIDA**

Principal Place of Business

1520 ROYAL PALM SQUARE BLVD.
STE. 210
FT. MYERS FL 33919-1036
US

Mailing Address

1520 ROYAL PALM SQUARE BLVD.
STE. 210
FT. MYERS FL 33919-1036
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2409740

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HUNT, DAVID W
1520 ROYAL PALM SQUARE BLVD.
STE. 210
FT. MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, provisions of Section 607.0505, Florida Statutes.

SIGNATURE

David W. Hunt **DAVID W. HUNT** President

DATE

1/17/95

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

GREEN, BRUCE D

STREET ADDRESS

12800 UNIVERSITY DRIVE, SUITE 600

CITY-ST-ZIP

FORT MYERS FL

TITLE

CD

NAME

NATHAN, JAMES R.

STREET ADDRESS

3333 Hibiscus Street

CITY-ST-ZIP

FT. MYERS FL

TITLE

D

NAME

IDELSON, CHARLES K

STREET ADDRESS

13792 Pine Villa Lane

CITY-ST-ZIP

FT. MYERS FL

TITLE

P

NAME

HUNT, DAVID W

STREET ADDRESS

12800 UNIVERSITY DR 600

CITY-ST-ZIP

FT. MYERS FL

TITLE

STD

NAME

INGE, RONALD

STREET ADDRESS

14860 SIX MILE PARKWAY

CITY-ST-ZIP

FORT MYERS FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 incorporator or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE:

David W. Hunt **DAVID W. HUNT**

DATE

1/17/95

DAYTIME PHONE #

813-277-3233