

AMENDED
NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 AUG -2 AM 9:06

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # N12266
 1. Entity Name
 FLORIDA INSTITUTE FOR WORKFORCE
 INNOVATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 249 W. UNIVERSITY AVE.		3. Mailing Address 249 W. UNIVERSITY AVE.	
Suite, Apt. #, etc. STE. A		Suite, Apt. #, etc. STE. A	
City & State GAINESVILLE, FL.		City & State GAINESVILLE, FL.	
Zip 32601	Country USA	Zip 32601	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2596359	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name ELENA HERRERA	
Street Address (P.O. Box Number is Not Acceptable) 1111 12 th ST.	
STE. 308	
City KEY WEST	FL Zip Code 33040

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D ELENA HERRERA 1111 12 th ST., STE. 308 KEY WEST, FL. 33040	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100006953451--8 08/07/02-01071-028 *****70.00 *****70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/P/D MIKE SCICCHITANO 633 N.W. 8 th ST. GAINESVILLE, FL. 32601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D RAY MILLER 1201 SEMONTON ST. KEY WEST, FL. 33040	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D PAULA RODRIGUEZ 7514 MESSON ST. BROOKSVILLE, FL. 34613	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALE KELLAN 601 FRONT ST. KEY WEST, FL. 33040	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARLYN SOMMERHOFF 19950 OVERSEAS HWY. SUGARLOFF KEY, FL. 33042	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Mike Scicchitano 7/29/02 352-846-2874
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E0378 (12/01)

7/29/02

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Officers and Directors

TITLE: D
NAME: Alicia Mahoney
STREET ADDRESS: 7524 SW 135th Terr.
CITY-ST-ZIP: Archer, FL 32618

TITLE: D
NAME: Dr. Elizabeth Swett
STREET ADDRESS: University of Florida
P.O. Box 100175
CITY-ST-ZIP: Gainesville, FL 32610

TITLE: D
NAME: Ken Wardlow
STREET ADDRESS: 3142 Northside Dr.
CITY-ST-ZIP: Key West, FL 33040