


FILE NOW: FILING FEE IS \$61.25

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SECTION OF THE STATE
TALLAHASSEE, FLORIDA

000600

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N43000
 1. Corporation Name
FLORIDA INITIATIVES, INC.

Principal Place of Business 4504 ROCKBRIDGE HOLLOW TALLAHASSEE FL 32308	Mailing Address 1400 VILLAGE SQUARE BLVD. UNIT 3-221 TALLAHASSEE FL 32312
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 04/17/1991
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3079349
City & State 23	City & State 28	Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
NABORS, JOAN B. 1400 VILLAGE SQUARE BLVD., #3-221 TALLAHASSEE FL 32312		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	000002894800--8 -06/04/99--01028--004
		84 City	*****61.25 FL *****61.25

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Joan B. Nabors Joan B. Nabors 6/1/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YEISLEY, COLLEEN	12 NAME	
STREET ADDRESS	2107 MONTICELLO DR	13 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32303	14 CITY-ST-ZIP	
TITLE	STD <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELEGAL, VIRGINIA S	22 NAME	
STREET ADDRESS	1840 WAGON WHEEL CIRCLE	23 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32310	24 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NABORS, ROBERT L	32 NAME	
STREET ADDRESS	4504 ROCKBRIDGE HOLLOW	33 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32308	34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE: Robert L. Nabors 6/1/99 850-224-4070
Signature, typed or printed name of signing officer or director. (NOTE: Registered Agent signature required when reinstating) DATE Telephone #

CR2E037 (11/98)