

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **N49255** (5)
1. Corporation Name
NORTHWOOD BUSINESS DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address
415 25TH ST WEST PALM BEACH FL 33407 US

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified **06/03/1992** 3a. Date of Last Report **03/08/1996**
4. FEI Number **65-0352279** 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
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LUPU, VINCENT
425 24TH STREET
WEST PALM BEACH FL

10. Name and Address of New Registered Agent
81 Name: **LYNN C. BRANCH**
82 Street Address (P.O. Box Number is Not Acceptable)
415-25th St.
83 **West Palm Bch**
84 City **FL** 85 Zip Code **33407**

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 **Lynn C. Branch**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
D **LUPU, VINCENT**
425 24TH STREET
W. PALM BEACH FL ☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PD **DEPREZ, CLAUDIA**
10953 N. MILITARY TRAIL
PALM BEACH GARDENS FL ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
TD **BRANCH, LYNN**
417 25TH STREET
W. PALM BEACH FL ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Sec. Director
Cheryl Carpenter
2300 N. Dixie
West Palm Bch FL 33407 ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

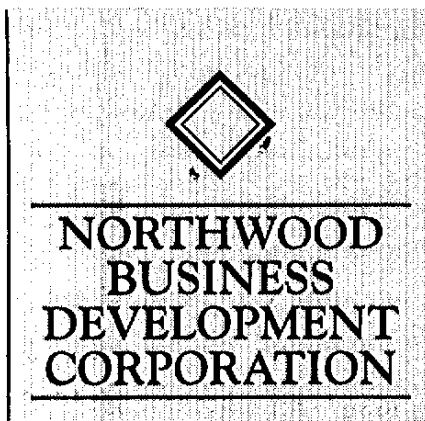
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME **900002321309--4**
2.3 STREET ADDRESS **-10/15/97--01095--002**
2.4 CITY-ST-ZIP *******61.25 *****61.25**
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 unchanged, or on an attachment with an address.

SIGNATURE **Lynn C. Branch** SIGNATURE REQUIRED

9-25-97 (860533-6206)

CR2E037 (4/97)



September 25, 1997

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500


Re: Nonprofit Corporation Annual Report 1997

Enclosed find a new report plus a second check # 1592 dated September 25, 1997.

I sent the original report on March 3, 1997, check # 1520, as of this date, the check has never cleared the bank. I assuming it is lost.

If there are any questions,, please call at (561) 832-6776.

Respectfully,


Lynn C. Branch
Treasurer