

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007729

**FILED**  
**Jan 29, 2021**  
**Secretary of State**  
**6475828120CC**

**Entity Name:** FLORIDA SMALL BUSINESS DEVELOPMENT FOUNDATION, INC.

**Current Principal Place of Business:**

220 WEST GARDEN STREET, SUITE 301  
PENSACOLA, FL 32502-5617

**Current Mailing Address:**

220 WEST GARDEN STREET, SUITE 301  
PENSACOLA, FL 32502-5617 US

**FEI Number:** 20-0205132

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KOCOUREK, TODD G  
1351 N GADSDEN STREET  
TALLAHASSEE, FL 32303 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KIRBY, CHERYL  
Address        671 ARAGON ST  
City-State-Zip: PENSACOLA FL 32502

Title            SECRETARY  
Name            LACOSTE, BRIDGET  
Address        553 TILLAGE DRIVE  
City-State-Zip: CANTONMENT FL 32533

Title            TREASURER  
Name            LACOSTE, BRIDGET  
Address        553 TILLAGE DRIVE  
City-State-Zip: CANTONMENT FL 32533

*I hereby 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 all other like empowered.*

SIGNATURE: BRIDGET LACOSTE

SECRETARY/TREASURER 01/29/2021

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date