

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12266

**FILED**  
**Feb 26, 2018**  
**Secretary of State**  
**CC2733099037**

**Entity Name:** FLORIDA INSTITUTE FOR WORKFORCE INNOVATION, INC.

**Current Principal Place of Business:**

408 WEST UNIVERSITY AVE  
STE 111  
GAINESVILLE, FL 32601

**Current Mailing Address:**

PO BOX 13522  
GAINESVILLE, FL 32604 US

**FEI Number:** 59-2596359

**Certificate of Status Desired:** Yes

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

JANOSKI, LYNN  
408 W. UNIVERSITY AVENUE  
SUITE 111  
GAINESVILLE, FL 32601 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:** LYNN JANOSKI

02/26/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HALVOSA, WILL  
Address 408 W. UNIVERSITY AVENUE  
111  
City-State-Zip: GAINESVILLE FL 32601

Title EXECUTIVE DIRECTOR.  
Name LESLIE, JONATHAN L  
Address 408 W. UNIVERSITY AVENUE  
SUITE 111  
City-State-Zip: GAINEVILLE FL 32601

Title VP  
Name ROWE, JONATHAN  
Address 408 WEST UNIVERSITY AVE  
STE 111  
City-State-Zip: GAINESVILLE FL 32601

Title PRESIDENT  
Name JANOSKI, LYNN  
Address 408 WEST UNIVERSITY AVE  
STE 111  
City-State-Zip: GAINESVILLE FL 32601

Title TREASURER  
Name KABINU, DUNCAN  
Address 408 W. UNIVERSITY AVENUE  
SUITE 111  
City-State-Zip: GAINESVILLE FL 32601

Title SECRETARY  
Name TESCH-VAUGHT, KIM  
Address 408 W. UNIVERSITY AVENUE  
SUITE 111  
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR  
Name SIMMONDS, GIGI  
Address 408 WEST UNIVERSITY AVE  
STE 111  
City-State-Zip: GAINESVILLE FL 32601

*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:** JONATHAN LESLIE

EXECUTIVE DIRECTOR

02/26/2018

Electronic Signature of Signing Officer/Director Detail

Date