

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000004373

**FILED  
Jan 18, 2017  
Secretary of State  
CC4671133459**

**Entity Name:** FINANCIAL BUSINESS TRAINING INSTITUTE, INC.

**Current Principal Place of Business:**

301 EAST PINE STREET, STE 175-B  
ORLANDO, FL 32801

**Current Mailing Address:**

301 EAST PINE STREET, STE 175-B  
ORLANDO, FL 32801

**FEI Number:** 47-4513805

**Certificate of Status Desired:** No

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

R. BRIGHT & ASSOCIATES, P.A.  
924 N. MAGNOLIA AVE., STE 306  
ORLANDO, FL 32803 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 D  
Name ODONGO, JOYCE  
Address 800 NORTH MAGNOLIA AVE., STE 900  
City-State-Zip: ORLANDO FL 32803

Title D  
Name HAMER, JANET  
Address 1060 WEST INTERNATIONAL  
SPEEDWAY BLVD.  
City-State-Zip: DAYTONA BEACH FL 32114

Title D  
Name ANDARGE, FOZIA  
Address 1510 E. COLONIAL DRIVE STE 210  
City-State-Zip: ORLANDO FL 32803

Title CEO  
Name LONG, INEZ  
Address 301 EAST PINE STREET, STE 175-B  
City-State-Zip: ORLANDO FL 32801

Title CONTROLLER  
Name ORAINE, REID  
Address 301 E. PINE STREET  
175  
City-State-Zip: ORLANDI FL 32801

*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:** INEZ LONG

**CEO**

**01/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date