### 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N34170

Entity Name: FLORIDA BUSINESS DEVELOPMENT CORPORATION

**FILED** Dec 09, 2015 **Secretary of State** CC3004182336

### **Current Principal Place of Business:**

5950 HAZELTINE NATIONAL DRIVE

SUITE 625

ORLANDO, FL 32822

## **Current Mailing Address:**

6801 LAKE WORTH ROAD SUITE 209

LAKE WORTH, FL 33467 US

FEI Number: 65-0179159 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MANOS, EMMANUEL 6801 LAKE WORTH ROAD SUITE 209 LAKE WORTH, FL 33467 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: EMMANUEL MANOS 12/09/2015

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title Title **DPST** D

Name ZUKER, HARRY Name MANOS, EMMANUEL

4800 NORTH FEDERAL HIGHWAY, 6801 LAKE WORTH ROAD, SUITE 209 Address Address

SUITE B205

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: BOCA RATON FL 33431

Title D Title

FORTIN, MICHAEL Name Name GESIO, EDUARDO

Address 401 EAST LAS OLAS BOULEVARD, Address

7270 N.W. 12TH STREET, PH #1 9TH FLOOR

City-State-Zip: FORT LAUDERDALE FL 33301 City-State-Zip: MIAMI FL

Title Title

Name SMITH, SEABRON Name MAYHEW, MARK

401 WEST ATLANTIC AVENUE, SUITE Address 7270 N.W. 12TH STREET, PH #1 Address

City-State-Zip: MIAMI FL 33126

City-State-Zip: DELRAY BEACH FL 33444

Title D Title D

Name WOONTON, MARC Name SPRINGER, JIM

Address 2810 CENTERPORT CIRCLE Address 8101 OKEECHOBEE BOULEVARD City-State-Zip: POMPANO BEACH FL 33046 City-State-Zip: WEST PALM BEACH FL 33411

### Continues on page 2

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.

12/09/2015 SIGNATURE: EMMANUEL MANOS **PRESIDENT** 

# Officer/Director Detail Continued:

Title Title D

Name OJEDA, OMAR Name PALAZZO, TONY

100 SE 2ND STREET 3500 PARKWAY LANE, SUITE 430 Address Address

City-State-Zip: NORCROSS GA 30092 City-State-Zip: MIAMI FL 33131

VΡ Title Title D

THIEFAULT, PARALEE Name Name DOBSON, TAYLOR

Address 6801 LAKE WORTH ROAD 2207 GATEWAY DRIVE Address SUITE 209

City-State-Zip: OPELIKA AL 36801

City-State-Zip: LAKE WORTH FL 33467