

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51218

**Entity Name:** THE CENTER FOR TECHNOLOGY, ENTERPRISE AND DEVELOPMENT, INC.**FILED**  
**Jan 28, 2016**  
**Secretary of State**  
**CC6590740488****Current Principal Place of Business:**401 WEST ATLANTIC AVENUE  
SUITE O-9  
DELRAY BEACH, FL 33444**Current Mailing Address:**401 WEST ATLANTIC AVENUE  
SUITE O-9  
DELRAY BEACH, FL 33444 US**FEI Number: 65-0362710****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SMITH, SEABRON A  
401 WEST ATLANTIC AVENUE  
SUITE O-9  
DELRAY BEACH, FL 33444 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 TD  
Name BROUSSARD, ARNOLD A  
Address 6406 BLUE BAY CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title VPD  
Name PSOINOS, GEORGE D  
Address 1615 FORUM PLACE SUITE 500  
City-State-Zip: WEST PALM BEACH FL 33401Title PD  
Name NEWBOLD, TONY  
Address 1000 NW 17TH AVE  
City-State-Zip: DELRAY BEACH FL 33447Title SD  
Name HART, NADINE  
Address 205 NW 2ND STREET  
City-State-Zip: DELRAY BEACH FL 33444Title DIRECTOR  
Name ELMORE, GEORGE  
Address 1320 N. OCEAN BLVD.  
City-State-Zip: GULFSTREAM FL 33483Title DIREC  
Name MOLNAR, CAROL  
Address 11470 NW 39TH COURT  
City-State-Zip: CORAL SPRINGS FL 33065Title DIRE  
Name ROGERS, CHERYL  
Address 1402 TUSCANY WAY  
City-State-Zip: BOYNTON BEACH FL 33435

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: TONY NEWBOLD****PRESIDENT****01/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date