## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706670

(7)

THE FLORIDA ECONOMIC DEVELOPMENT COUNCIL INC.

Principal Place of Business

Mailing Address

FIL.E.D

97 MAR 10 PM 3: 27

SECRETARY OF STATE TALLAHASSEE FLORIDA



335 BEARD ST TALLAHASSEE FL 323	303	335 BEARD ST TALLAHASSEE FL 32303-622	77			
				3. Date Incorporated or Qualified 01/07/1964	3a. Date of Last Report 05/01/1996	
2. Principal Place of	of Business	28. Mailing Address	<u> </u>	4. FEI Number	Applied For	
1 502 E	. Jefferson St	26 502 E. Jett	erson Str	ec+ 23-7035680	Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
3 Tallaho		28 Tallahass		Trust Fund Contribution	Added to Fees	
32301	Country 25 USA	29 32301	Country 30 USA		Yes No	
9.	Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent	
			B1 Name	Lohrengel Pet	cr	
LOHRENGEL, PETER			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
335 BEARD S				502 E. Jetterson	5-Strect	
TALLAḤASSE	E FL 32303		83			
)			84 City	allahassee	FL 85 Zip Code 3230 1	
11. Pursuant to the	e provisions of Sections 617.0502	and 617.1508, Florida Statute	es, the above-named o	corporation submits this statement for the p	ourpose of changing its registered	
agent. I am far	miliar with, and accept the obligati	ons of Section 617.0503, Flo	rida Statutes.	oration's board of directors. I hereby accep	or the appointment as registered	
SIGNATURE	70/1/-	from the		2/20	·/5 /	
Signal	lore, typed or ponted name of registered agent		E: Registered Agent signature r		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE D	DESTENDED ON THE	DELETE "	1.1 TITLE	michael Frey	<b></b>	
NAME BR	KELLENEELLI .HM					
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STREET ADDRESS 11	170 MARTIN L KING JR BLVD	BLDG 7	1.3 STREET ADDRESS	350 SE 2na Street,	5th Floor	
STREET ADDRESS 11 City-St-Zip FT			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	350 SE 2na Street, S Ft. Lauderdale, FL.	33301	
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14. To hereby corrily that the limb matter supplied with mis thing does not qualify for the excellent of state in Section 1.19.0.0 (3), inclosed statutes. Further certify that information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of changed or on an attachment with a address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/97

Daytime Phone # 0007511