## 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 706670** 

Entity Name: THE FLORIDA ECONOMIC DEVELOPMENT COUNCIL INC.

FILED Jan 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1530 METROPOLITAN BLVD 325 JOHN KNOX ROAD

TALLAHASSEE, FL 32308 US SUITE 201

TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

1530 METROPOLITAN BLVD PO BOX 3186

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32315 US

FEI Number: 23-7035680 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LOHRENGEL, PETER BOUTIN, BARBRA 1530 METROPOLITAN BLVD PO BOX 3186

TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32315 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: BARBRA BOUTIN 01/29/2002

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition

 Title:
 V/T
 ( ) Delete
 Title:
 D
 (X) Change

 Name:
 LARSON, WES
 Name:
 KILBERG, KELLIE JO

Address: PO BOX 550 Address: 390 N. ORANGE AVE., STE. 1300

City-St-Zip: PALATKA, FL 321760550 City-St-Zip: ORLANDO, FL 32801 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: MC DERMOTT, BILL Name: MCDERMOTT, BILL

 Name:
 MC DERMOTT, BILL
 Name:
 MCDERMOTT, BILL

 Address:
 600 N BROADWAY AVE., STE. 300
 Address:
 2016 CLUB HOUSE ROAD

 City-St-Zip:
 BARTOW, FL 338303804
 City-St-Zip:
 LAKELAND, FL 33813 US

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

 Name:
 MALLOT, JERRY
 Name:
 LARSON, WES

 Address:
 3 INDEPENDENT DR
 Address:
 PO BOX 550

City-St-Zip: JACKSONVILLE, FL 32202 Addless. PO BOX 330 City-St-Zip: PALATKA, FL 32178 US

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf ED} \qquad ({\sf X}) \, {\sf Change} \ (\ ) \, {\sf Addition}$ 

 Name:
 ROGEL, STUART
 Name:
 BARBRA, BOUTIN

 Address:
 4300 W CYPRESS ST STE 250
 Address:
 PO BOX 3186

City-St-Zip: TAMPA, FL 336074160 City-St-Zip: TALLAHASSEE, FL 32315 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBRA BOURIN ED 01/29/2002