2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 04, 2008 8:00 am
Secretary of State
06-04-2008 90009 036 ****61.25

DOCUMENT # 706670

1. Entity Name

THE FLORIDA ECONOMIC DEVELOPMENT COUNCIL INC.

Principal Place of Business	Mailing Address
325 JOHN KNOX ROAD SUITE 201 TALLAHASSEE FL 32303 US	PO BOX 3186 TALLAHASSEE FL 32315 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7035680 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EVANCHO, AMY
325 JOHN KNOX RD, ATRIUM BLDG
SUITE 201
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC CE NEMECEK, TAMMIE 3050 N HORSESHOE DR #120 NAPLES FL 34104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DEBORAH WILKINSON 115 S. ANDREWS AVENUE Ste A-540 FT LAUDERDALE, FL 33301	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PC CLEM, TED PO BOX 1850 PANAMA CITY FL 32402	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RAYMOND GILLEY C 301 E. PINE STREET, STE 900 ORLANDO, FL 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CE GRAY, GENE PO BOX 1110 TAMPA FL 33601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ANDRA CORNELIUS VC 1580 Waldo Palmer Dr. Ste 2 TALLAHASSEE, FL 32308	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P EVANCHO Spelling Correction EVANCO, AMY 325 JOHN KNOX RD, STUITE 201 TALLAHASSEE FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MICHAEL MEISEL VC 13805 58TH ST North, Ste 1-200 CLEARWATER, FL 33760	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C GOODRICH, JOAN 300 SE 2ND STREET, STE 780 FT. LAUDERDALE FL 33301	☒ Delete As of July 1, 2008	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC SCHONS, ED 12424 RESEARCH PKWY, STE 100 ORLANDO FL 32826	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ May 28, 2008 850-201-3332