

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706670

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** THE FLORIDA ECONOMIC DEVELOPMENT COUNCIL INC.

**Current Principal Place of Business:**

3802 SPECTRUM DRIVE  
TAMPA, FL 33612 US

**New Principal Place of Business:**

**Current Mailing Address:**

3802 SPECTRUM DRIVE  
TAMPA, FL 33612 US

**New Mailing Address:**

**FEI Number:** 23-7035680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVANCHO, AMY  
3802 SPECTRUM DRIVE  
TAMPA, FL 33612 US

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

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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: SCHONS, ED  
Address: 12424 RESEARCH PARKWAY, SUITE 100  
City-St-Zip: ORLANDO, FL 32826 US

Title: CE  
Name: KIRKLAND, BETH  
Address: P.O. BOX 1639  
City-St-Zip: TALLAHASSEE, FL 32302 US

Title: VC  
Name: KIMBALL, LINDSEY  
Address: 800 WEST MONROE ST.  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: P  
Name: EVANCHO, AMY  
Address: 7604 SOUTH SPARKMAN ST.  
City-St-Zip: TAMPA, FL 33616

Title: VC  
Name: NERON, BILL  
Address: 201 E. MAIN STREET  
City-St-Zip: TAVARES, FL 32778

Title: VC  
Name: TOKAR, PETER  
Address: 6591 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33314

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: AMY EVANCHO

P

04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date