## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Feb 07, 2003 8:00 am Secretary of State

1/13

•/ - 01\_13\_2003\_90/28\_011\_\*\*\*\*61\_2/

. Entity Name		# 706670 IOMIC DEVELOPM	ent co	uncil inc.					01-11	3-2003 90	)428 011 <b>*</b>	***61.25	
Principal Place of Business 25 JOHN KNOX ROAD UITE 201 ALLAHASSEE FL 32303			Mailing Address PO BOX 3186 TALLAHASSEE FL 32315 US					55005245					•
S 2. Principal Pla		988	3. Maili	ng Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & State			City & State					4. FEI Number 23-7035680			_	Applied For Not Applicable	
Zip Country			Zip		Col	Country		5. Certificate of Status Desired LJ Fee			Fee Required		
•	6 Name	and Address of Current	Registere	d Agent				7. Name and Add	ress of New	Registered	Agent		
	V. 1909190					Name							
BOUTIN, BARBRA PO-BOX 3186 325 John Knox RO. Suite TALLAHASSEE FL 32315  TALLAHASSEE FL 32315						Street Address (P.O. Box Number is Not Acceptable)							
TALLAHASSEE FL 32915 32303  8. The above named entity submits this statement						City				FL	_		
the obligation	ons of regist	ered agent.  Or printed name of registered agen		plicable (NO)	rE: Register	ed Agent signatu		d when reinstating)	<u> </u>	DATE			
FILE NOW: FEE IS \$61.25  9. Election Campa Trust Fund Conte								Added to Fees	Flo	rida Depa	rtment of S	itate	
10.		OFFICERS AND D	RECTORS		11.	·	<b>D</b> W	ADDITIONS SHANG	ES TO OFFI	CEHS AND U	Change	Addition	ଛ
NAME STREET ADDRESS	390 N. OF	KELLIE JO VANGE AVE., STE. 130	) <b>0</b>	☐ Delete			140 140	22 DAVIC 210 ROSS BARWATER	) eve LT . FL	- BLV 337	0., st 62	E.709	SR2E037 (10/02)
TITLE NAME	D MCDERM	) FL 32801 OTT, BILL	·	☐ Delete	TITT NA	LE ME	Dig	ECTOR IXE LANGE LANGUE	e i Gil		☐ Change		CR2
STREET ADDRESS CITY-SI-ZIP	1 AUG 43 P FI 40040					REET ADDRESS NY-ST-ZIP	1# 3\$	$\sigma \in \mathcal{L}$	MS	3TE.	100		
-TITLE	D		<del></del> .				12	LAUOZE	VILE,	3330	Change	Addition	
	PO BOX	550			* STI	ame Reet address Ty-st-zip							
CITY-ST-ZIP	PALA IKA	FL 32178	<u>.</u>	☐ Delete	_	TLE					☐ Change	☐ Addition	Ì
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BARBRA, PO BOX	BOUTIN 3186 325 Jd SSEE FL 32915	on Kn	-	ST	ME REET ADDRESS TY-ST-ZIP		. <u>.</u>					
TITLE NAME STREET ADDRESS		3230	3	□ Delete	NA ST	TLE NME REET ADDRESS ( TY-S1-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	NA ST Ci	tle Ame Treet address TY-ST-ZIP					Change	Addition	
12. I hereby indicated	on this rep	he information supplied wort or supplemental reporting receiver or trustee entrachment with an addres	nowered to	execute this repo	rt as req	xemption sta nature shalt h uired by Cha	ted in S ave the apter 6	Section 119.07(3)(i), F e same legal effect as 17, Florida Statutes; a	forida Statute if made und nd that my n	es. I further of ler oath; that ame appears	ertify that the i f am an officer s in Block 10 or	information or director r Block 11 if	