

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham,
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 715616 (9)

1. Corporation Name

ECONOMIC DEVELOPMENT COUNCIL, INC.

Principal Place of Business

Mailing Address

110 E. SILVER SPGS. BLVD.
OCALA FL 32670-6613

110 E. SILVER SPGS. BLVD.
OCALA FL 32670-6613

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1968

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1095184

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATTLES, BRETT B.
110 E. SILVER SPGS. BLVD.
OCALA, FL. FL 32670

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	WATTLES, BRETT B
STREET ADDRESS	110 E SILVER SPGS BLVD
CITY - ST - ZIP	OCALA FL
TITLE	C
NAME	DEAN, ED
STREET ADDRESS	230 NE 25 AVE
CITY - ST - ZIP	OCALA FL
TITLE	VD
NAME	MANGAN, MIKE
STREET ADDRESS	725 NE 25TH AVE.
CITY - ST - ZIP	OCALA FL 34470
TITLE	TD
NAME	WERNER, DAVE
STREET ADDRESS	35 SE 1ST AVE.
CITY - ST - ZIP	OCALA FL 34470
TITLE	VS
NAME	TESCH, PETER
STREET ADDRESS	110 E SILVER SPGS BLVD
CITY - ST - ZIP	OCALA FL
TITLE	D
NAME	NEWTON, SKIP
STREET ADDRESS	1515 E SILVER SPGS BLVD
CITY - ST - ZIP	OCALA FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	Brett Wattles
1.3 STREET ADDRESS	110 E SS Blvd
1.4 CITY - ST - ZIP	OCALA, FL 34470
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Margaret Palmer
2.3 STREET ADDRESS	828 SE 7th King St
2.4 CITY - ST - ZIP	OCALA, FL 34471
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	Mike Mangan
3.3 STREET ADDRESS	725 NE 25th Ave
3.4 CITY - ST - ZIP	OCALA, FL 34470
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	Dave Werner
4.3 STREET ADDRESS	35 SE 1st Ave
4.4 CITY - ST - ZIP	OCALA, FL 34470
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	Peter Tesch
5.3 STREET ADDRESS	110 E. S.S. Blvd.
5.4 CITY - ST - ZIP	OCALA, FL 34470
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Jon Kurtz
6.3 STREET ADDRESS	203 E. SS. Blvd
6.4 CITY - ST - ZIP	OCALA, FL 34470

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the 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 its receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with no change.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Typed Name)