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Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 715616 (9)

1. Corporation Name
ECONOMIC DEVELOPMENT COUNCIL, INC.

Principal Place of Business	Mailing Address
108 N MAGNOLIA AVENUE SUITE 700 OCALA FL 34470 US	P.O.BOX 459 OCALA FL 34478 US

3. Date Incorporated or Qualified: 11/25/1968

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

TESCH, PETE
108 NORTH MAGNOLIA AVENUE
SUITE 700
OCALA, FL . FL 34470

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	☒ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	ANDREWS, SCOTTY		1.2 NAME	WALLY WAGONER	
STREET ADDRESS	108 N. MAGNOLIA AVE STE 700		1.3 STREET ADDRESS	108 N. MAGNOLIA AVE. STE 700	
CITY-ST-ZIP	OCALA FL 34470		1.4 CITY-ST-ZIP	OCALA, FL 34470	
TITLE	D	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition
NAME	PALMER, MARGARET		2.2 NAME	BONNIE STOUT	
STREET ADDRESS	108 N MAGNOLIA AVE STE 700		2.3 STREET ADDRESS	108 N. MAGNOLIA AVE STE. 700	
CITY-ST-ZIP	OCALA FL 34470		2.4 CITY-ST-ZIP	OCALA, FL 34470	
TITLE	D	☐ DELETE	3.1 TITLE	T	☒ Change ☐ Addition
NAME	WHITTAKER, SANDRA		3.2 NAME	WHITTAKER, SANDRA	
STREET ADDRESS	109 W SILVER SPRINGS BLVD		3.3 STREET ADDRESS	109 W SILVER SPGS BLVD	
CITY-ST-ZIP	OCALA FL 34475		3.4 CITY-ST-ZIP	OCALA, FL 34475	
TITLE	D	☐ DELETE	4.1 TITLE	C	☒ Change ☐ Addition
NAME	FUTCH, KIM		4.2 NAME	FUTCH, KIM	
STREET ADDRESS	316 SW 33RD AVENUE		4.3 STREET ADDRESS	316 SW 33rd AVE.	
CITY-ST-ZIP	OCALA FL 34474		4.4 CITY-ST-ZIP	OCALA, FL 34474	
TITLE	P	☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	TESCH, PETE		5.2 NAME	HANK EHLERS	
STREET ADDRESS	108 N. MAGNOLIA AVE STE 700		5.3 STREET ADDRESS	108 N MAGNOLIA AVE STE 700	
CITY-ST-ZIP	OCALA FL 34470		5.4 CITY-ST-ZIP	OCALA, FL 34470	
TITLE	C	☐ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	KURTZ, JON		6.2 NAME	KURTZ, JON	
STREET ADDRESS	108 N MAGNOLIA AVE STE 700		6.3 STREET ADDRESS	108 N MAGNOLIA AVE. STE. 700	
CITY-ST-ZIP	OCALA FL 34470		6.4 CITY-ST-ZIP	OCALA, FL 34470	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Peter Tesch