FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCU	MENT # 75439	7 (8)		ļ			
THE FLORIDA INSTRUCTIONAL DEVELOPMENT AGENCY, INC					THE REPORT OF THE PARTY AND A STATE AND A STATE AND A STATE AND A STATE AS A		
Principal Place of Business Mailing Address					† 1804)) 1886; Bibli Bibbb 1848 (Bib) 1886; I	NEON BYDY DIDIN ENDN BYDN BYDN BYDN 1081	
4628 MITCHER RD 4628 MITCHER RD				}	3. Date Incorporated or Qualified		
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 346			552	Ľ	09/29/1980		
				- 1	4. FEI Number	Applied For	
2. Principal P	2. Principal Place of Business 2a. Mailing Address				NOT APPLICABLE	Not Applicable \$8.75 Additional	
21		26		}	5. Certificate of Status Desired	Fee Required	
Suite, Apt.	Sulte, Apt. #, etc. Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be			
22 City & Stat					Trust Fund Contribution L		
23 28		 n '	City & Glate		7. Is this nonprofit corporation a homeowners association?		
[Zip	Country	Zip	Country		8. This corporation owes or has pald to		
24	25		30		Personal Property Tax due June 30,	Yes No	
·	9. Name and Address of Currer	t Hegistered Agent	81 Nam		10. Name and Address of New Regist	erea Agent	
DANENI							
DANENBURG, WILLIAM P 4628 MITCHER RD			82 Stre	et Addres:	s (P.O. Box Number is Not Acceptable)		
NEW PO	83						
			84 City			85 Zip Code	
11 Durewant	to the provisions of Sections 617 050	2 and 617 1509 Florida Statute	the above name	ad corpor	ation submits this statement for the puro	FL 88 ZIP COUR	
office or r	egistered agent, or both, in the State	of Florida, Such change was a	uthorized by the c	orporation	ation submits this statement for the purp i's board of directors. I hereby accept th	e appointment as registered	
SIGNATURE	in tamilia with and accept the obligi	anons of, addition of 7.0000, Fio	iloa olalules.				
	Signature, typed or printed name of registered ago		Registered Agent signal	ture required t		AND DIDECTORS IN 12	
12.	OFFICERS AN	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Z Addition	
NAME	DANENBURG, WILLIAM P.	-	1.2 NAME	10	r		
STREET ADDRESS	4828 MITCHER RD		1.3 STREET ADDRES	١ .	-,		
CITY-ST-ZW	NEW PORT RICHEY FL 3465		1.4 CITY-ST-ZIP			4-7-7-	
- TITLE .	D CAN	☐ DELETE	2.1 TITLE	M	Sopold	Change Addition	
NAME STREET ADDRESS	Leapold, Gail 63360 Pine Knoll Cir		2.2 NAME 2.3 STREET ADDRES	۸ ۱	elpaca	\	
CITY-ST-ZIP	BEND OR		2.4 City-ST-ZIP	"		97701	
TITLE	D D	☐ DELETE	3.1 TITLE	1		Change Addition	
NAME	TOOTHMAN, REX C		32 NAME	13	r. Loma alta	1	
STREET ADDRESS	1221 LAKE POINT DR		3.3 STREET ADDRES	s J	homa weca	0.15	
CITY-ST-ZIP TITLE	LAKELAND FL D	DELETE	3.4. CITY - ST-ZIP 4.1 TITLE		33	Change Addition	
NAME	SAWYER, JAYNE NOWELL	C) ptirit	4.2 NAME	M	٢.	A common Actions	
STREET ADDRESS	1166 MENLO DR		4.3 STREET ADDRES			. 1	
CITY-ST-ZIP	ALTADENA CA		4.4 CITY-ST-ZIP		<u> </u>	001	
TITLE	V	DELETE	5.1 TITLE	MR	2.	00 / Change	
NAME	ROLAND, RICHARD G	148	5.2 NAME	.		`	
STREET ADDRESS	15210 AMBERLY DR., APT 16 TAMPA FL	310	5.3 STREET ADDRES	S (23647	
CITY-ST-ZIP TITLE	I I I I I I I I I I I I I I I I I I I	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE			Change Addition	
NAME		_	6.2 NAME			<u>-</u>	
STREET ADDRESS			6.3 STREET ADDRES	s (
CITY-ST-ZIP			6.4 CITY-ST-ZIP		_		

Thereby 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.

GNATURE:

CONDENSE:

C

SIGNATURE:

FILED

Feb 16 1998 8:00am

Secretary of State