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Feb 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J89135 (4)

1. Corporation Name
FLORIDA RESEARCHERS UNLIMITED, INC.

Principal Place of Business
3105 TIPPERARY DRIVE
TALLAHASSEE FL 32308

Mailing Address
3105 TIPPERARY DRIVE
TALLAHASSEE FL 32308-3328



3. Date Incorporated or Qualified 08/25/1987
3a. Date of Last Report 01/31/1996

4. FEI Number 59-2861041
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

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

KORALIS, CAROL C.
3105 TIPPERARY DRIVE
TALLAHASSEE FL 32308

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 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the registered agent and the corporation if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.1 TITLE ☐ DELETE

NAME
KORALIS, CAROL C.
STREET ADDRESS
3105 TIPPERARY DRIVE
CITY- ST- ZIP
TALLAHASSEE FL

13.2 TITLE ☐ DELETE

NAME
KORALIS, NICHOLAS C.
STREET ADDRESS
3105 TIPPERARY DRIVE
CITY- ST- ZIP
TALLAHASSEE FL

13.3 TITLE ☐ DELETE

NAME
KORALIS, ANNA M.
STREET ADDRESS
3105 TIPPERARY DRIVE
CITY- ST- ZIP
TALLAHASSEE FL

13.4 TITLE ☐ DELETE

NAME
KORALIS, CHRISTINA N.
STREET ADDRESS
3105 TIPPERARY DRIVE
CITY- ST- ZIP
TALLAHASSEE FL

13.5 TITLE ☐ DELETE

NAME
RAMSEY, JOHANA
STREET ADDRESS
2850 WYNTERHALL ROAD, #102
CITY- ST- ZIP
HUNTSVILLE AL

13.6 TITLE ☐ DELETE

NAME
GOLDING, SANDRA
STREET ADDRESS
3784 UNIVERSITY DR #1122
CITY- ST- ZIP
HUNTSVILLE AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Nicholas C. Koralis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-97

Date

904 668-2264

Daytime Phone

CR2E034 (9/96)