

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05096

FILED
Mar 20, 2009
Secretary of State

Entity Name: FLORIDA MINORITY SUPPLIER DEVELOPMENT COUNCIL, INC.

Current Principal Place of Business:

6880 LAKE ELLENOR DRIVE
104 A
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

6880 LAKE ELLENOR DRIVE
104A
ORLANDO, FL 32809 US

New Mailing Address:

6880 LAKE ELLENOR DRIVE
104 A
ORLANDO, FL 32809 US

FEI Number: 59-2547257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, MALIK
545 VERN DR
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

ALI, MALIK
6880 LAKE ELLENOR DR
ORLANDO, FL 32809 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MALIK ALI

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BARRY, ROBERT
Address: 7445 EXCHANGE DR
City-St-Zip: ORLANDO, FL 32809 US

Title: V () Delete
Name: SICA, NORMA MS
Address: 6990 LAKE ELLENOR DRIVE
City-St-Zip: ORLANDO, FL 32809 US

Title: S (X) Delete
Name: RENGEM, LI MR
Address: 1 COCA COLA PLAZA
City-St-Zip: ATLANTA, GA 30313 US

Title: D () Delete
Name: MCCORMES BALLOU, ROBERT MR
Address: 2200 OLD GERMANTOWN RD, MC 32B3633
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: P () Delete
Name: ALI, MALIK MR
Address: 545 VERN DR
City-St-Zip: ORLANDO, FL 32809 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: WERTSCHING, RICHARD
Address: 1800 LIVE OAK LANE
City-St-Zip: LAKE BUENA VISTA, FL 32830 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ALI, MALIK MR
Address: 6880 LAKE ELLENOR DR
City-St-Zip: ORLANDO, FL 32809 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MALIK ALI

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date