## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # N20596 A, INC. Principal Place of Business 315 E. ROBINSON ST. SUITE 222 ORLANDO FL 32801 2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip 25

in the second

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

(5)

BLACK BUSINESS INVESTMENT FUND OF CENTRAL FLORID Mailing Address 315 E. ROBINSON ST. SUITE 222 3. Date Incorporated or Qualified ORLANDO FL 32801 05/12/1987 4. FEI Number Applied For 59-2861155 Not Applicable 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees City & State 7. Is this nonprofit corporation a homeowners association? ☐ Yes M No 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 

Yes No Country Zip Country 24 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LONG, INEZ, J Street Address (P.O. Box Number Is Not Acceptable) 315 E. ROBINSON ST., SUITE 222 83 ORLANDO FL 32801 85 Zip Code 84 City 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 Signature, typed or printed name of registered agent and title if applicable Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE DC NAME STEWART, LARRY 1.2 NAME 315 E. ROBINSON STREET, STE. 222 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32801 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE DS NAME **BUTLER, JEAN** 2.2 NAME 315 E. ROBINSON STREET, STE. 222 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE LONG. INEZ NAME 3.2 NAME 315 E. ROBINSON STREET, STE. 222 STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32801 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE SULLIVAN, LEO NAME 4. 2 NAME 315 E. ROBINSON STREET, STE. 22 STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL 32801 CITY-ST-7IP 4.4 CITY-ST-ZIP □ D€LETE 5.1 TITLE Change Addition TITLE

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 ennual 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 fustee 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.

5.2 NAME

6.1 TITLE

62 NAME

DELETE

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

3/24/98

Change

Addition

**FILED** 

Mar 31 1998 8:00am

Secretary of State