FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED

97 MAY - 1 PH 3: 38

DIVISION OF CORPORATIONS 1997 SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # N25870 (9) FLORIDA BUSINESS DEVELOPMENT FUND, INC. Principal Place of Business Mailing Address P. O. BOX 11309 136 S BRONOUGH ST TALLAHASSEE FL 32302 TALLAHASSEE FL 32302-3309 3a. Date of Last Report 3. Date incorporated or Qualified 04/12/1988 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Jefferson 502 E Jefferson 59-2903861 502 E Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Ŧ٤ Tallahassee Tallahassec Trust Fund Contribution Added to Fees 28 23 32301 Country 3230 1 Country 8. This corporation has liability for intangible tax under s. 199.032, 25 US Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Junet Watermeier WATTLES, BRETT Street Address (P.O. Box Number is Not Acceptable) 82 110 E. SILVER SPRINGS BLVD. **B3** OCALA FL 33478 306 Zip Code 3390 84 City Myers 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

Signative Appear or printed name of registered agent and tritle if applicable.

(NOTE: Registered Agent alignature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 96/6) DELETE 1.1 TITLE TITLE Janet Watermeier NAME WATTLES, BRETT 1.2 NAME 2180 W. 1st St, #306 110 E SILVER SPRINGS BLVD STREET ADDRESS 1.3 STREET ADDRESS FT Myers, FL 33901 **OCALA FL 34478** 1.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE TITLE 2.1 TiTLE Marsha Keaton OLIVERI, MARC 22 NAME NAME 390 N Grave Ave, # 1300 200 E ROBINSON ST. SUITE 600 2.3 STREET ADDRESS STREET ADDRESS Orlando FL 3280 1 3000021 ORLANDO FL 32801-7159 2.4 CITY-ST-ZIP CITY-ST-ZIP 05/02/97-01148 TITLE DELETE 31 TITLE CONSTANT, CHRIS 3.2 NAME NAM *****61.25 *****61.25 200 E LAS OLAS BLVD. 3.3 STREET ADORESS STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change **X** Addition 41 TITLE TITLE Frank Tanerrino FERRARA, CLAIRE 4 2 NAME NAME 117 W Garden St COLLINS BLDG RM 325, 107 W GAINES ST STREET ADDRESS 4.3 STREET ADDRESS FL 32553 Pensarola TALLAHASSEE FL 32399-2000 4.4 CITY-ST-ZIP CITY - ST- 7IP DELETE 5.1 TITLE Change Addition 7ITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-SI-ZIP 5.4 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY - S1 - ZIP

DELETE

9 41/328 - 316 1 Daylime Phone * 0008145

Change

Addition