

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25870

FILED
Jan 25, 2005
Secretary of State

Entity Name: FLORIDA BUSINESS DEVELOPMENT FUND, INC.

Current Principal Place of Business:

1530 METROPOLITAN BLVD
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

325 JOHN KNOX RD, L-103
TALLAHASSEE, FL 32303 US

Current Mailing Address:

1530 METROPOLITAN BLVD
TALLAHASSEE, FL 32308 US

New Mailing Address:

325 JOHN KNOX RD, L-103
TALLAHASSEE, FL 32303 US

FEI Number: 59-2903861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERMEIER, JANET
2180 W. 1ST ST.
SUITE 306
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C/D () Delete
Name: SMITH, REGINA
Address: 2180 W. 1ST ST., #306
City-St-Zip: FT. MYERS, FL 33901

Title: S () Delete
Name: RONNE, ROBIN
Address: P. O. BOX 420
City-St-Zip: TAMPA, FL 33601

Title: T/D () Delete
Name: FREY, MIKE
Address: PO BOX 550
City-St-Zip: PENSACOLA, FL 32591

Title: V/C () Delete
Name: SLOAN, CHARLIE
Address: 301 E. PINE STREET, SUITE 900
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REGINA SMITH

C/D

01/25/2005

Electronic Signature of Signing Officer or Director

Date