FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 17 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N93000000858 (1)**

1. Corporation Name

FLORIDA SMALL DISADVANTAGED MANUFACTURERS CORPOR ATION

Principal Place of Business	Mailing Address
107 WEST GAINES STREET COLLINS BLDG. ROOM 443 TALLAHASSEE FL 32399-2000 US	107 WEST GAINES STREET COLLINS BLDG. ROOM 443 TALLAHASSEE FL 32399-2000 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/11/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3170984 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

HAGERMAN, MAURY S.
107 W. GAINES ST.
SUITE 443
TALLAHASSEE FL 32399-2000

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BURCH, CLYDE	12 NAME	
STREET ADDRESS	10101 NINTH STREET NORTH	13 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	C/D ☑ Change ☐ Addition
NAME	BUSH, MICHAEL	22 NAME	
STREET ADDRESS	1501 72ND STREET NORTH	23 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	VC/D ☑ Change ☐ Addition
NAME	CAMPBELL, BRENT	32 NAME	
STREET ADDRESS	1000 NW 51 STREET	33 STREET ADDRESS	569 S.E. 15th Avenue
CITY-ST-ZIP	BOCA RATON FL 33429-1328	34 CITY-ST-ZIP	Deerfield Beach, Fl. 33441
TITLE	D	41 TITLE	☑ Change ☐ Addition
NAME	DEBORD, RICK	42 NAME	
STREET ADDRESS	1250 GRUMMAN PLACE	43 STREET ADDRESS	2000 West NASA Blvd., MS FOB-221
CITY-ST-ZIP	TITUSVILLE FL 32780	44 CITY-ST-ZIP	Melbourne, Fl. 32904-2322
TITLE	D	51 TITLE	☑ Change ☐ Addition
NAME	DUNBAR, MICHAEKL	52 NAME	Dunbar, Michael
STREET ADDRESS	PO BOX 555837 ,MP-141	53 STREET ADDRESS	5600 Sand Lake Rd, MP 141
CITY-ST-ZIP	ORLANDO FL 32862-8007	54 CITY-ST-ZIP	Orlando, Fl. 32855-5837
TITLE	D	61 TITLE	T/D ☐ Change ☑ Addition
NAME	KMET, STANLEY	62 NAME	Len Stout
STREET ADDRESS	1101 FLORIDA EDUCATION CENTER	63 STREET ADDRESS	1500 Gateway Blvd.
CITY-ST-ZIP	TALLAHASSEE FL 32399-0400	64 CITY-ST-ZIP	Boynton Beach, Fl. 33426-8292

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Michael A. Burch Michael A. Burch 4/11/95 813/381-2000 x2158
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0009430

N93000000858

Florida Small Disadvantaged Manufacturers Corporation

Florida Division of Corporations - Annual Report - May 1, 1995

Block 13 - Changes and Additions to Directors - (continued)

S/D
Lawrence Taylor
1214 Education Center
Tallahassee, Fl. 32399

D
D. J. Perez
Post Office Box 109600, MS 710-40
West Palm Beach, Fl. 33410-9600

D
T. Jeff Walker
16333 Bay Vista Drive
Clearwater, Fl. 34618