

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jan 28 1997 8:00am
Secretary of State

DOCUMENT # N93000000858 (1)
1. Corporation Name

FLORIDA SMALL DISADVANTAGED MANUFACTURERS CORPORATION

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 2930 Commonwealth Blvd.

Suite, Apt. #, etc.

22

City & State

23 Tallahassee, FL

24 Zip
32303

25 Country
USA

2a. Mailing Address

26 P.O. Box 4013

Suite, Apt. #, etc.

27

City & State

28 Tallahassee, FL

29 Zip
32315

30 Country
USA

3. Date Incorporated or Qualified

03-11-93

3a. Date of Last Report

05-01-96

4. FEI Number

59-3170984

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Maury S. Hagerman
107 West Gaines Street
Suite #443
Tallahassee, FL 32399

10. Name and Address of New Registered Agent

81 Name

Len W. Stout

82 Street Address (P.O. Box Number is Not Acceptable)

c/o Motorola, Inc.

83

1500 Gateway Blvd.

84 City

Boynton Beach,

FL

85 Zip Code

33426-8292

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

Len W. Stout

Len W. STOUT

1-22-97

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME Michael Bush
STREET ADDRESS 1501 72nd Street North
CITY-ST-ZIP St. Petersburg, FL 33710

TITLE ☒ DELETE
NAME Rick Debord
STREET ADDRESS 200 West Nasa Blvd.
CITY-ST-ZIP Melbourne, FL 32904-2322

TITLE ☒ DELETE
NAME Len Stout
STREET ADDRESS 1500 Gateway Blvd.
CITY-ST-ZIP Boynton Beach, FL 33426-8292

TITLE ☒ DELETE
NAME Michael Dunbar
STREET ADDRESS 5600 Sand Lake Rd., MP 141
CITY-ST-ZIP Orlando, FL 32855-5837

TITLE ☒ DELETE
NAME Clyde Burch
STREET ADDRESS 10101 Ninth Street North
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE ☒ DELETE
NAME Sam Murphy
STREET ADDRESS 2930 Commonwealth Blvd.
CITY-ST-ZIP Tallahassee, FL 32303

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

Len W. Stout

Len W. STOUT

1-22-97

561-739-2833

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)

NONPROFIT CORPORATION ANNUAL REPORT - 1997

DOCUMENT # N93000000858 (1)

Additions to Section #12:

D

D. J. (Buddy) Perez
P.O. Box 109600
West Palm Beach, FL 33410-9600

D

Dr. Y. A. Umar
7900 N.E. 2nd Avenue, Suite 501
Miami, FL 33138