

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000003536

1. Entity Name

FLORIDA EXPORT FINANCE CORPORATION



Principal Place of Business

10400 NW 33RD STREET
SUITE 200
MIAMI, FL 33172-5902 US

Mailing Address

10400 NW 33RD STREET
SUITE 200
MIAMI, FL 33172-5902 US



01052006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0427755

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FANCHER, JOHN STEPHEN
10400 NW 33RD STREET
SUITE 200
MIAMI, FL 33172-5902

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCEO
FANCHER, J STEPHEN
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARTIN, GRAHAM
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KOCOUREK, TODD G ESQ
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TWEEDIE, ROBERT
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FLORES, CINDY
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PONTILLO, SALVATORE M
10400 NW 33RD STREET SUITE 200
MIAMI, FL 331725902

000000396397
01/30/06-80008-012 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

J.S. FANCHER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 6, 2006

Date

786 8450400

Daytime Phone #