

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

Feb 20 1996 8:00 am
Secretary of State

DOCUMENT # N94000004101 (1)

1. Corporation Name

NORTH FLORIDA TECHNOLOGY INNOVATION CORPORATION
OF GAINESVILLE

Principal Place of Business

Mailing Address

1 PROGRESS BLVD.
BOX 7
ALACHUA FL 32615

1 PROGRESS BLVD.
BOX 7
ALACHUA FL 32615



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/18/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3265041

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

WASHER, SUSAN
1 PROGRESS BLVD.
BOX 7
ALACHUA FL 32615

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

HOLBROOK, KAREN A
223 GRINTER HALL, UNIVERSITY OF FLORIDA
GAINESVILLE FL 32611-5500

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

CD

PHILLIPS, WINFRED M
300 WEIL HALL, UNIVERSITY OF FLORIDA
GAINESVILLE FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

BLUM, FRED
8570 PHILLIPS HIGHWAY, STE. 101
JACKSONVILLE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

ALBERTSON, LAWRENCE
1 PROGRESS BLVD., STE. 144
ALACHUA FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S

WASHER, SUSAN
1 PROGRESS BLVD. STE. 144
ALACHUA FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☒ Addition

D
James Spraul
411 N. Main Street
Gainesville, FL 32601

D
H. Edward Dean
230 NE 25th Ave
Ocala, FL 34470-2938

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)(k), 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: *Susan B. Washer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96
Date

904-462-0498
Daytime Phone #

CR2E037 (12/95)