## **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

DOCUMENT #	N9500001688	(§

DRIVE SMART FLORIDA, INC. Mailing Address Principal Place of Business 5405 DIPLOMAT CIRCLE 5405 DIPLOMAT CIRCLE SUITE 154 SUITE 154 ORLANDO FL 32810 ORLANDO FL 32810-5681 3. Date Incorporated or Qualified 3a. Date of Last Report 04/26/1996 04/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 59-3314899 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tex under s. 199.032, Yes No. 30 24 29 Florida Statutes 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name HAGAN, FRED B 82 Street Address (P.O. Box Number is Not Acceptable) 5405 DIPLOMAT CIRCLE 83 SUITE 154 ORLANDO FL 32810 84 City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE GRIMMING, RONALS DVORNIK, DONALD F 1.2 NAME NEEL KIRKMAN BUILDING, 2900 APALACHICOLA PKW NAME 17200 COMMERCE PARK BLVD. STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33467** TALLAHASSE, FL 1.4 CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ DELETE 2.1 TITLE ☐ Change Addition HAGAN, FRED B 22 NAME NAME 5405 DIPLOMAT CIRCLE, #154 STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32810 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change BRAEULER, KAREN M NAME 3.2 NAME 17200 COMMERCE PARK BLVD. 3.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33647** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change \_\_\_ Addition TITLE n 41 TITLE BLY. RANDY E NAME 4.2 NAME 1515 NORTH WESTSHORE BLVD. STREET ADDRESS 4.3 STREET ADORESS **TAMPA FL 33607** 4.4 CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change ■ Addition RINALDI, LOUIS J NAME 5 2 NAME 702 N. FRANKLIN STREET STREET ADDRESS 5.3 STREET ADDRESS **TAMPA FL 33601** 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition 6.2 NAME NAME

6.3 STREET ADDRESS

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

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

**SIGNATURE:** 

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND THE DOT PRINTED MAYE OF SIGNATURE AND THE DOT PRINTED MAYE OF SIGNATURE OF DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

1-17-97

(407)539-2511

FILED

Jan 27 1997 8:00am

Secretary of State