FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Moftham 🗽

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # N9600003085 (5)

NORTHWEST FLORIDA ECONOMIC DEVELOPMENT COALITION . INC.

Principal Place of Business

Mailing Address

FILED Mar 12 1997 8:00am Secretary of State



685 7TH ST Chipley Fl 32428	P O BOX 457 CHIPLEY FL 32428 0457			2. Data languagested or Qualified	Se Dai	to of l as	at Papart	
				3. Date Incorporated or Qualified 06/11/1996	Sa. Dat	.e oi Las	st Report	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number			Applied For	
21 P.D. 1804 1151	26			39-340473			Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		*	5 Additional Required	
City & State PENSITEDLA, FL	City & State	 			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Countr 24 3 25 2 0 25	29	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
9. Name and Addre	ess of Current Registered Agent			10. Name and Address of New Ro	gistered A	igent		
		81	Name					
ellis, O. L. Jr 1297 Fairway Dr		62	82 Street Address (P.O. Box Number is Not Acceptable)					
CHIPLEY FL 32428		83						
		84	City		FL	85 Z	ip Code	
	ctions 617.0502 and 617.1508, Florida St					1		
SIGNATURE Signature typed or printed name		(NOTE: Registered Agen			DATE	DIRECT	CODD IN 10	
	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		_		
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STREET ADDRESS		6.2 NAME 6.3 STREET A	address					

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: