2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2008 8:00 am Secretary of State

50011										
DOCUMENT # N9700001563 1. Entity Name BIO FLORIDA, INC.						, 401		08 90025 (003 ****6	31.25
222 LAKEVIEW AVENUE 222 4TH FLOOR 4TH		Mailing Address 222 LAKEVIEW AVE 4TH FLOOR WEST PALM BEACH		1						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01092008	Chg-NP	CR2E0	37 (12/06)		
City & State		City & State				4. FEI Numbe 59-3436				pplied For at Applicable
Zip	Country	Zip	Co	untry		5. Certificate	of Status Desire	; <u> </u>	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent				7. Name and	Address of Nev	v Registered	Agent	
NELSON, GREGORY A ESQ. 222 LAKEVIEW AVENUE				Name Street Address (P.O. Box Number is			r is Not Accepts	able)		
SUITE 400 WEST PAL) LM BEACH, FL 33401					,				
				City	· · · · ·	· · · · · · · · · · · · · · · · · · ·		FL	Zip Cod	θ
	named entity submits this statement fo ions of registered agent.	. the perpendicularity	,				.,		<u> </u>	_
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable.	NOTE: Register	ed Agent signa	ture required	when reinstating)		DATE		
SIGNATURE .	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	9. Election		Financing	ture required	\$5.00 May B Added to Fees	9 F	· · · · · · · · · · · · · · · · · · ·	k payable t	
SIGNATURE .	Filing Fee is \$61.25	9. Election Trust Fu	Campaign I	Financing tion.		\$5.00 May B Added to Fees	F	Make chec lorida Depai	tment of S	tate
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Trust Fu RECTORS	Campaign Ind Contribu	Financing tion.	CE	\$5.00 May B Added to Fees	Allen	Make chec forida Depai CERS AND DI	RECTORS IN Change	1 10 Addition
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIF CHR MCLAIN, THOMAS H 5800 PARK OF COMMERCE BL	9. Election Trust Fu Delete Delete	Campaign and Contribution 111. TITL NAM STR CIT TITL NAM STR	Financing tion. LE ME REET ADDRESS Y-ST-ZIP	C.	\$5.00 May B Added to Fees ADDITIONS/CHAP CUSSELL	Allen A	Make chec forida Depai CERS AND DI	RECTORS IN Change	1 10 Addition
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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 pulser-like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-08

561-653-3839