## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #
1. Corporation Name
N97000002014

THE FLORIDA ANTIVENIN BANK, INC.

Principal Place of Business

Mailing Address

2755 Lionheart Rd. Winter Park, FL 3279

2755 Lionheart Rd.

APPROVED AND FILED

97 HAY 28 AM 9: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

W#11C	er tark' th 25/3	z winter Par	K, FL	32/9	3. Date Incorporated or Qualified 3a. Date of Last Report	
<b>A</b> D	16			<del></del>	09 / 25 / 1995 5/01/96 4. FEI Number   Applied For	
2. Principal Place of Business 2a. Mailing Address						
26   Suite, Apt. #, etc.   Suite, Apt. #, etc.				31-1495384 Not Appl 5.0-45		
22					5. Certificate of Status Desired Fee Required	
City & State City & State					6. Election Campaign Financing \$5.00 May Be	
23 28					Trust Fund Contribution Added to Fees	
Zip Country Zip		Zıp	p Country		8. This corporation has liability for intangible tax under s. 199.032,	
24 25 29 30			30	Fiorida Statutes Yes No		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
our gene, beinits H.				82 Street Address (P.O. Box Number is Not Acceptable)		
2755 Lionheart Road						
Winter Park, Florida 32792-4313			<u> </u>			
			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						
	Signative typicous printed name of registered agen			per erutangia Int	quired when reinstating) DATE	
12.	OFFICERS AND	DELETE	13. 1.1 T(TLE	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addit	
NAME	PD	C Dittit	1.1 TITLE 1.2 NAME		C change C Andri	
	Sargent, Dennis M.			ADDRESS		
CITY ST-ZIF	2755 Lionheart F Winter Park, FL	Road 4343	1.4 CITY - S	- 1		
TITLE	-wincer <del>Park, s.L</del> -	DELETE	2.1 TITLE		Change Addit	
NAMi ·	Hill, Wayne		2.2 NAME	İ		
STREET ADDRESS	2755 Lionheart R	beo.	2.3 STREET	ADDRESS		
CITY-ST ZIP	Winter Park, Flo	.uau .mida 22702	2. 4 CITY-	ST-ZIP		
THE	STD	DELETE	3.1 TITLE		STD Change Additi	
NAME	Stevens, Suzi		3.2 NAME	-	McDaniel, Steve	
STREET ALLORESS	2755 Lionheart R	oad	33 STREET	ADDRESS	2755 Lionheart Road	
CITY ST ZIP	Winter Park, FL		3 4. CITY-!	ST-ZIP	2755 Lionheart Road Winter Park, Fl 32792 1313 Addition	
TITLE NAME		י - ביטננדונ	4 1 TITLE 4 2 NAME		Change   Additi	
STREET ADDRESS			4 2 NAME 4 3 STREET	ADORESS		
CITY ST ZIP		•	4.4 CITY-S			
Till		☐ DELETE	5.1 TITLE	***	Change Additi	
NAME			5.2 NAME		be 128 Change Additi	
STREET ADDRESS			5.3 STREET	ADDRESS	•	
CITY - ST. ZIP			5.4 CITY-S	T-ZIP		
THE		☐ DELETE	6.1 TITLE		05 01 96 95342 038 Change Additi	
NAME			6.2 NAME		- · · · · · · ·	
STREET ADDRESS			6.3 STREET		\$200.00 \$61.15	
City-St-ZiP	w northy that the information supplied	with this filing does not qualit	6.4 CITY-S		ted in Section 119.07(3)(i), Florida Statutes. I further certify that the	
informatio	i indicated on this annual report or su	pplemental annual report is to	rue and accu	irate and the	hat my signature shall have the same legal effect as if made under oath; t	
appears ir	ricer or director of the corporation of the Block 12 of Block 13 if changed, or i	ne receiver or trustee empow on an attachment with an add	ereu io exec fress.	ute triis rep	port as required by Chapter 617, Florida Statutes; and that my name	

E OF SIGNING OFFICER OR DIRECTOR SARGENT 5/22/97