

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 DEC 10 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N980000002813

1. Corporation Name

FLORIDA DEVELOPMENT ENTERPRISES CORP.
3821 N. SHORE DRIVE
WEST PALM BEACH, FL 33407

Principal Place of Business

Mailing Address

2460 N. Haverhill Rd
WEST PALM BEACH, FL 33417

2. Principal Place of Business

2a. Mailing Address

21 N/A

26 N/A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 N/A

27 N/A

City & State

City & State

23 N/A

28 N/A

Zip

Zip

Country

Country

24 N/A

29 N/A

25

30

3. Date Incorporated or Qualified

05/15/98

4. FEI Number

65-0835508

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional

Fee Required

6. Election Campaign Financing

□

\$5.00 May Be

Added to Fees

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

T. EDWARD KINSEY
3821 N. SHORE DRIVE
WEST PALM BEACH, FL 33407

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
T. EDWARD KINSEY - DCP
3821 N. SHORE DR.
WEST PALM BEACH, FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Ann B. Demps - DS
5020 N.W. 16th COURT
LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Jonnie M. Long - DT
1413 6th STREET
WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Dorothy STROMAN R.N. - D
4982A WATERMILL Circle
Boynton Beach, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Dr. Lloyd C. LaGrange, Jr. - M.D.-D
2617 N. Flagler Dr. Suite 202
WEST PALM BEACH, FL 33407

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

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***70.00 ***70.00

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14. I 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, with all other like empowered.

SIGNATURE: J. Edward Kinsey, DCP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/2/99 Date (541) 478-9333 Daytime Phone #

CR2E037 (11/98)