2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004207

Entity Name: FLORIDA REDEVELOPMENT ASSISTANCE, INC.

FILED Feb 23, 2015 Secretary of State CC3244067017

Current Principal Place of Business:

301 SOUTH BRONOUGH STREET

SUITE 300

TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 1757

TALLAHASSEE, FL 32302

FEI Number: 59-2088898 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAROL, WESTMORELAND 301 S. BRONOUGH STREET SUITE 300 TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail :

Title P Title 1

Electronic Signature of Registered Agent

Name LINDORFF, STEVE Name GIANIKAS, GUS

Address 301 S. BRONOUGH STREET, SUITE Address 301 S. BRONOUGH STREET, SUITE

300

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title D Title D

Name BARKER, COURTNEY Name COLONNA, DIANE

Address 301 S. BRONOUGH STREET, SUITE Address 301 S. BRONOUGH STREET, SUITE 300

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title D Title D

Name CROWDER, KEVIN Name DURDEN, BRENNA

Address 301 S. BRONOUGH STREET, SUITE Address 301 S. BRONOUGH STREET, SUITE

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title PRESIDENT

Name GUS , GIANIKAS

Address PO BOX 1757

City-State-Zip: TALLAHASSEE FL 32302

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GUS GIANIKAS EXECUTIVE DIRECTOR 02/23/2015

Date