

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000007543

**Entity Name:** FLORIDA DEPARTMENT OF TRANSPORTATION FINANCING CORPORATION

**FILED  
Mar 06, 2024  
Secretary of State  
7078756954CC**

**Current Principal Place of Business:**

1801 HERMITAGE BLVD  
SUITE 200  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

P.O. BOX 13300  
TALLAHASSEE, FL 32317

**FEI Number: 82-4725841**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BIGGINS, DONNA S  
1801 HERMITAGE BLVD  
SUITE 200  
TALLAHASSEE, FL 32308 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D, PRESIDENT, CEO  
Name WATKINS, BEN  
Address 1801 HERMITAGE BLVD  
City-State-Zip: TALLAHASSEE FL 32308

Title D  
Name PERDUE, JARED  
Address 605 SUWANNEE ST  
City-State-Zip: TALLAHASSEE FL 32399

Title SECRETARY, TREASURER  
Name BIGGINS, DONNA S  
Address 1801 HERMITAGE BLVD  
SUITE 200  
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR  
Name SPENCER, CHRIS  
Address THE CAPITOL, ROOM 1702  
City-State-Zip: TALLAHASSEE FL 32399-0001

*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: DONNA S. BIGGINS**

**SECRETARY**

**03/06/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date