

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42280

Entity Name: BUSINESS INNOVATION CENTER AT FLORIDA STATE
UNIVERSITY-PANAMA CITY, INC.**Current Principal Place of Business:**5230 WEST US HIGHWAY 98
PANAMA CITY, FL 32401**Current Mailing Address:**5230 WEST US HIGHWAY 98
PANAMA CITY, FL 32401 US**FEI Number: 59-3073391****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JACKSON, ROBERT C
304 MAGNOLIA AVENUE
PANAMA CITY, FL 32401 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: ROBERT C. JACKSON****04/29/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST CHAIRMAN
Name BENNETT, JEREMY
Address 5230 WEST US HIGHWAY 98
City-State-Zip: PANAMA CITY FL 32401

Title EXECUTIVE DIRECTOR
Name KIDWELL, PAMELA
Address 5230 WEST US HIGHWAY 98
City-State-Zip: PANAMA CITY FL 32401

Title SECRETARY
Name SORCI, JOE
Address 648 FLORIDA AVENUE
City-State-Zip: PANAMA CITY FL 32405

Title CHAIRMAN
Name CONOLEY, JENNIFER
Address 1230 E. 15TH STREET
City-State-Zip: PANAMA CITY FL 32405

Title TREASURER
Name MCCAMBRY, AL JR.
Address 5230 WEST US HIGHWAY 98
City-State-Zip: PANAMA CITY FL 32401

Title VC
Name WALKER, RAY
Address 605 W. GARDEN STREET
City-State-Zip: PENSACOLA FL 32502

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: PAMELA KIDWELL**EXECUTIVE DIRECTOR****04/29/2016**

Electronic Signature of Signing Officer/Director Detail

Date