## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000732

Entity Name: ENTERPRISE FLORIDA, INC.

**Current Principal Place of Business:** 

800 N MAGNOLIA AVE **SUITE 1100** 

ORLANDO, FL 32803

**Current Mailing Address:** 

800 N MAGNOLIA AVE **SUITE 1100** 

ORLANDO, FL 32803 US

FEI Number: 59-3165226 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MURPHY, PAMELA 800 N MAGNOLIA AVE **SUITE 1100** ORLANDO, FL 32803 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

**FILED** Feb 04, 2015

**Secretary of State** 

CC9622045657

Officer/Director Detail:

Title Title

SWOOPE, GRAY SALMON, GRIFF Name Name

800 N MAGNOLIA AVE SUITE 1100 800 N. MAGNOLIA AVENUE, SUITE Address Address

1100

City-State-Zip: ORLANDO FL 32803 City-State-Zip: ORLANDO FL 32803

Title

Title Name SCOTT, RICK

Name LAUBSCHER, LOUIS Address PL-05 THE CAPITOL

Address 800 N MAGNOLIA AVE SUITE 1100

City-State-Zip: TALLAHASSEE FL 32399 City-State-Zip: ORLANDO FL 32803

VC Title

Title Т Name BECKER, ALAN

Name MURPHY, PAMELA Address 1 EAST BROWARD BLVD

Address 800 N MAGNOLIA AVE SUITE 1100 **SUITE 1800** 

ORLANDO FL 32801 FT. LAUDERDALE FL 33301 City-State-Zip: City-State-Zip:

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 MURPHY

**VP FINANCE & ACCOUNTING** 

02/04/2015