

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 27, 2001 08:00 AM
Secretary of State

DOCUMENT # 719261

1. Entity Name
 ASSOCIATED BUILDERS AND CONTRACTORS FLORIDA EAST COAST
 CHAPTER, INC.

Principal Place of Business 4700 NW 2ND AVE BOCA RATON FL 33431	Mailing Address 4700 NW 2ND AVE BOCA RATON FL 33431
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2. Principal Place of Business 3730 COCONUT CREEK PARKWAY	3. Mailing Address 3730 COCONUT CREEK PARKWAY
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Suite, Apt. #, etc. SUITE 200	Suite, Apt. #, etc. SUITE 200
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City & State COCONUT CREEK FL	City & State COCONUT CREEK FL
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Zip 33066	Country US	Zip 33066	Country US
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4. FEI Number 59-1216595	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHAW DANNY J
 4700 NW 2ND AVE.
 #203
 BOCA RATON FL 33431 US

7. Name and Address of New Registered Agent

Name SHAW DANNY J
 Street Address (P.O. Box Number is Not Acceptable)
 3730 COCONUT CREEK PARKWAY
 SUITE 200
 City COCONUT CREEK FL Zip Code 33066

8. 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 _____ DATE **04/27/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
DV MOORE TIMOTHY O 6400 N ANDREWS AVE FT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
DV MAURER JESSE 6851 SW 21ST COURT DAVIE FL 33317	<input type="checkbox"/> Delete
D DEL VECCHIO PAUL 1181 S ROGERS CIRCLE #12 BOCA RATON FL 33487	<input type="checkbox"/> Delete
DST RIEGLER EUGENE 4051 SW 47TH AVE #105 DAVIE FL 33314	<input type="checkbox"/> Delete
DP MCCONCHIE JAMES P 2150 NW 33RD STREET SUITE C POMPANO BEACH FL 33069	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST VONKOSOVSKY DAN 2500 S.W. 3RD AVE. MIAMI FL 33129 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MAURER JESSE 6851 SW 21ST COURT DAVIE FL 33317 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV RIEGLER EUGENE 4051 SW 47TH AVE #105 DAVIE FL 33314 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCONCHIE JAMES P 2150 NW 33RD STREET SUITE C POMPANO BEACH FL 33069 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JESSE MAURER P **04/27/2001**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)