FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 726016

(9)

CENTRAL FLORIDA CHAPTER ASSOCIATED BUILDERS AND CONTRACTORS INC

								<u> </u>	l
Principal Place of Business Mailing Address				·			JAK BIBN BIBN RIBN BIR		
450 N WYMORE ROAD WINTER PARK FL 32789-2882 WINTER PARK FL 32789-2882 WINTER PARK FL 32789-2			-288 2						
						3. Date Incorporated or Qualified 04/06/1973	3a. Date of Las 04/05/	st Report	
	Place of Business	2a. Mailing Address				4. FEI Number	1 04/05/	T	
21 26					ŀ	59-1447179	<u> </u>	Applied For Not Applical	
Suite Apt. #, etc. Suite, Apt. #, etc.							_ \$8.7	5 Additional	
City I Cross						Certificate of Status Desired		Required	
23		City & State			-	6. Election Campaign Financing	\$5.	00 May Be	
Zip Country		Zip Country				Trust Fund Contribution	Add	led to Fees	
24	25	29	30	ry	ĺ	8. This corporation has liability for int	angible tax under :	s. 199.032,	
	9. Name and Address of Curr		130			Florida Statutes 10. Name and Address of New Reg	Yes No	<u></u> .	
			8	1 Name	9	TO: Nome and Address of New Met	Jistered Agent		
WYLIE,N	Kark P.			<u> </u>					
654 CAYUGA DRIVE			8:	2 Stree	Address (P.O. Say Number No. Acceptable) 1 2 7 9				一
WINTER	SPGS. FL 32708		83,			-05/21/9601025016			
	•			4		***61.25			
·			8-					ip Code	
 Pursuant or registe 	to the provisions of Sections 617.050 red agent, or both in the State of	2 and 617.1508, Florida Statutes	, the above	named c	corporatio	n submits this statement for the purpor		registered off	ice
familiar w	ith, and account the obligations of Sec	ction 617 0503, Florida Statutes.	a by the cor	poration's	s board o	n submits this statement for the purpor f directors. I hereby accept the appoin	tment as registered	ma i .trega t	
SIGNATURE	v vully	\mathcal{W}	Mark P.	Wvl	ie	4-X-	.91		
12.	Signature, typed or printed name of registered specific of the control of the con	of and the famplicable (NOT	Registered Age	ent signatura	required whe		DATE		-
TITLE	P	ND DIRECTORS	13.		IA ATS	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	ORS IN 12	
NAME	BROOKS, RANDY L.	Wasters	1.1 TITLE			, ut	Change	Addition	ı .
STREET ADDRESS	5695 BEGGS RD		12 NAME			r, William C.			
CITY-ST-ZIP	ORLANDO FL			I ADDRESS	400	1 Forsyth Road			_ Ji
TITLE	T	DELETE	1 4 CiTY-1 2 1 TITLE	51 · ZIP	H TIN	ten Park, Florida	32792		_
NAME	KEATING, TIMOTHY M.	_	2 2 NAME		VP	· ·	Change Change	☐ Addition	- ['
STREET ADDRESS	3333 LAWRENCE ST			T ADDRESS	Kea	ting, Timothy M.			
CITY-ST-ZIP	ORLANDO FL		2 4 CITY-		023	Lawrence Street			- 1
TITLE	VP	DELETE	3.1 TITLE		Δ.	D. on	TX Change	Addition	\dashv
NAME	KREISLER, GARY		3.2 NAME					[] Hadition	
STREET ADDRESS	799 BENNETT DR		3.3 STREET	ADDRESS	201	isler, Gary S. Orange Av. Suite	> 730		
CITY-ST-ZIP TITLE	LONGWOOD FL		3 4 CITY-	ST - ZIP	Urla	<u>ingo, Florida 3280</u>	11		
NAME	S COOREY DICHARD B	[☐ DELÉTE	4.1 TITLE		5-	D	☐ Change	Addition	_
STREET ADDRESS	COONEY, RICHARD P		4 2 NAME		Dwye	e. Timothy J	•		
CITY-ST-ZIP	2301 SILVER STAR RD ORLANDO FL		4.3 STREET	ADDRESS	900	Windenley Place, Su	ite 250		1
TITLE	D D	DELETE	4.4 CITY - S	T-ZIP	Mait	land, Florida 3275	1_{t}		3
NAME	SASSO, MICHAEL C		5.1 TITLE		Q	•	Change	■ Addition	4
STREET ADDRESS	1031 W MORSE BLVD STE 20	m	5.2 NAME		Sass	o, Michael C.			
CITY-ST-ZIP	WINTER PARK FL	7 V	5 3 STREET		1031	. W Morse Blvd. Suit	e 200		
TITLE	D	DELETE	5 4 CITY-S 6 1 TITLE	I - ZIP	Wint	er Park, Florida 3	2789		_ 0
NAME	BEASLEY, DAVID M		62 NAME				Change	Addition	
STREET ADDRESS	430 W DR		6.3 STREET	VUUDECC	Beas	ley, David M			1
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		6.3 STREET		430	West Drive			[]
4. I do hereby	certify that the information supplied a	adela Alain Albana Ingala and a said	0 4 0117-51	1 - ZIF	_Alta	Monte Springs Flor	ida 2271/	A	1

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118 of (3fk). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 fichanged, or on an attachment with an address. SIGNATURE:X Gary Kreisler

407/649~8274 Dayting Phone *