

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702339

1. Entity Name

FLORIDA GULF COAST CHAPTER ASSOCIATED BUILDERS &

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90216 010 ****61.25

Principal Place of Business

Mailing Address

4725 N. LOIS AVE
SUITE 230
TAMPA FL 33684-2117

4821 N. CLARK AVE.
P.O. BOX 152107
TAMPA FL 33684-2107

2. Principal Place of Business

7821 N. Dale Mabry
Suite, Apt. #, etc.
#106

3. Mailing Address

Suite, Apt. #, etc.

City & State
Tampa, FL

City & State

Zip
33614

Country
USA

Zip

Country

4. FEI Number

59-1235851

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIZEMORE, WILLIAM
109 N BRUSH ST
SUITE 200
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SHRUM, EARL
STREET ADDRESS 6711 26TH COURT E
CITY-ST-ZIP SARASOTA FL 34243

TITLE VP
NAME DAVE WADE
STREET ADDRESS P.O. Box 1100
CITY-ST-ZIP Clearwater, FL 33758

TITLE VP
NAME LENTZ, RICK
STREET ADDRESS 950 W KENNEDY BLVD, STE 600
CITY-ST-ZIP TAMPA FL 33609

TITLE TD
NAME KEITH ELLIS
STREET ADDRESS 1714 Cypress Street
CITY-ST-ZIP TAMPA, FL 33606

TITLE VD
NAME VANN, RANDY
STREET ADDRESS 2970 CARGO ST
CITY-ST-ZIP FT MYERS FL 33916

TITLE P
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME FERLITA, BILL J
STREET ADDRESS 509 S HYDE PARK AVE
CITY-ST-ZIP TAMPA FL 33606

TITLE SD
NAME Ray Douchard
STREET ADDRESS P.O. Box 6090
CITY-ST-ZIP Clearwater, FL 33758

TITLE SD
NAME REDMON, RICHARD
STREET ADDRESS 5706 BENJAMIN CTR DR STE 116
CITY-ST-ZIP TAMPA FL 33634

TITLE VD
NAME Jack Olmstead
STREET ADDRESS 5910 Hartford St
CITY-ST-ZIP Tampa, FL 33619

TITLE ED
NAME CONA, STEVE P, JR
STREET ADDRESS 4725 N. LOIS AVE. #230
CITY-ST-ZIP TAMPA FL 33684

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/20/00 (813) 879-8864

CR2E037 (9/99)