

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719247

Entity Name: C. SPELLMAN, INC.**Current Principal Place of Business:**3435 FISKE BLVD.
ROCKLEDGE, FL 32955-4507**Current Mailing Address:**P.O. BOX 560531
ROCKLEDGE, FL 32956-0531 US**FEI Number:** 59-1654170**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WALD, JAMES A
105 HIGHVIEW DR.
COCOA, FL 32922 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:** JAMES A. WALD

01/19/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WALD, JAMES A
Address 105 HIGHVIEW DR.
City-State-Zip: COCOA FL 32922

Title SECRETARY
Name BLANCHARD, JOHN M.
Address 7170 RALSTON STREET
City-State-Zip: MELBOURNE FL 32940

Title TREASURER
Name CZUCHAN, FRANK R.
Address 3021 CAMBERLY CIR.
City-State-Zip: VIERA FL 32940-6638

Title DIRECTOR
Name TRANCHITA, GERALD
Address 3435 FISKE BLVD
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name TURNER, FRANK L.
Address 3435 FISKE BLVD
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR
Name UTECHT, DAVID A
Address 1687 FENWAY CIRCLE
City-State-Zip: ROCKLEDGE FL 32955-3014

Title VP
Name SHARKEY, MICHAEL C
Address 886 EVERGREEN PL
City-State-Zip: ROCKLEDGE FL 32955-4149

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: JOHN M. BLANCHARD**SECRETARY/DIRECTOR**

01/19/2020

Electronic Signature of Signing Officer/Director Detail

Date