

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726016

**FILED**  
**Mar 24, 2015**  
**Secretary of State**  
**CC7481268038**

**Entity Name:** CENTRAL FLORIDA CHAPTER ASSOCIATED BUILDERS AND CONTRACTORS INC

**Current Principal Place of Business:**

651 DANVILLE DRIVE  
200  
ORLANDO, FL 32825

**Current Mailing Address:**

651 DANVILLE DRIVE  
200  
ORLANDO, FL 32825 US

**FEI Number: 59-1447179**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WYLIE, MARK P  
654 CAYUGA DRIVE  
WINTER SPGS., FL 32708 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

**Officer/Director Detail :**

Title VC  
Name BROWN, SKIP  
Address 630 MAGUIRE RD.  
City-State-Zip: OCOEE FL 34761

Title VCD  
Name BARNARD, CHARLIE  
Address 6557 HAZELTINE NATIONAL DR.  
SUITE ONE  
City-State-Zip: ORLANDO FL 32822

Title P  
Name WYLIE, MARK P  
Address 651 DANVILLE DRIVE STE. 200  
City-State-Zip: ORLANDO FL 32825

Title CHAIRMAN  
Name TUCKER, LARRY (CHIP)  
Address 3545 LAKE ALFRED ROAD  
City-State-Zip: WINTER HAVEN FL 33881

Title VCD  
Name BODINE, CINDY MCCREE  
Address 500 E. PRINCETON STREET  
City-State-Zip: ORLANDO FL 32803

Title TREASURER  
Name PERSON, RONALD J.  
Address 1417 EAST CONCORD STREET  
City-State-Zip: ORLANDO FL 32803

Title VC  
Name DODANE, MICHAEL L.  
Address 155 E. WILDMERE AVE.  
SUITE 1021  
City-State-Zip: LONGWOOD FL 32750

Title OTHER, GENERAL COUNSEL  
Name SASSO, MICHAEL C.  
Address 1031 WEST MORSE BLVD.  
SUITE 120  
City-State-Zip: WINTER PARK FL 32789

*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: MARK P. WYLIE**

**PRESIDENT & CEO**

**03/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date