

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747118

**Entity Name:** FLORIDA MOVERS AND WAREHOUSEMEN'S ASSOCIATION, INC.

**FILED**  
**Mar 09, 2016**  
**Secretary of State**  
**CC9994904103**

**Current Principal Place of Business:**

1390 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

1390 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312 US

**FEI Number:** 59-1915268

**Certificate of Status Desired:** No

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

SKROB, ROBERT  
1390 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312 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 C  
Name NEWITT, ANDY  
Address 15070 CORPORATE ROAD NORTH  
City-State-Zip: JUPITER FL 33478

Title S  
Name PARKS, LARRY  
Address 1622 91ST COURT  
City-State-Zip: VERO BEACH FL 32966

Title T  
Name DUNCAN, JIM  
Address 1117 THOMASVILLE ROAD  
City-State-Zip: TALLAHASSEE FL 32303

Title D  
Name BROWING, RANDY  
Address 3725 FRONTAGE ROAD N  
City-State-Zip: LAKELAND FL 33810

*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:** ANDY NEWITT

**CHAIRMAN**

**03/09/2016**

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

\_\_\_\_\_  
Date