

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000006079

**FILED**  
**Mar 15, 2022**  
**Secretary of State**  
**3856063568CC**

**Entity Name:** DESIGN-BUILD INSTITUTE OF AMERICA - FLORIDA REGION, INC.

**Current Principal Place of Business:**

1524 ANNA CATHERINE DR.  
ORLANDO, FL 32828

**Current Mailing Address:**

PO BOX 781172  
ORLANDO, FL 32878

**FEI Number: 59-3734951**

**Certificate of Status Desired: No**

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

WALLACE, KAREN  
1524 ANNA CATHERINE DRIVE  
ORLANDO, FL 32828 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            PRESIDENT  
Name            WALKER, CHARLES  
Address        9905 OLD ST. AUGUSTINE RD.  
                  SUITE 400  
City-State-Zip: JACKSONVILLE FL 32257

Title            VP  
Name            HUMPHRIES, KELLIE  
Address        225 WATER ST. STE. 1750  
City-State-Zip: JACKSONVILLE FL 32202

Title            SECRETARY  
Name            O'DONNELL, TODD  
Address        4912 WEST LA SALLE STREET  
City-State-Zip: TAMPA FL 33607

Title            TREASURER  
Name            LAMOUREUX, DIXIE  
Address        8985 PALM RIVER ROAD  
City-State-Zip: TAMPA FL 33619

*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: CHARLES R. WALKER, JR.**

**PRESIDENT**

**03/15/2022**

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

\_\_\_\_\_  
Date