# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05698

Entity Name: CENTRAL FLORIDA CHAPTER OF THE AMERICAN CONCRETE

INSTITUTE, INC.

FILED
Jan 11, 2024
Secretary of State
1653113656CC

# **Current Principal Place of Business:**

239 CALLIOPE STREET OCOEE, FL 34761

# **Current Mailing Address:**

239 CALLIOPE STREET OCOEE, FL 34761 US

FEI Number: 59-2481318 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

TU, DIEP T 239 CALLIOPE STREET OCOEE, FL 34761 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: DIEP TU 01/11/2024

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

TitleDIRECTORTitleSECRETARYNameSEIGLER, AMYNameRAMO, CARLA

Address 239 CALLIOPE STREET Address 239 CALLIOPE STREET

City-State-Zip: OCOEE FL 34761 City-State-Zip: OCOEE FL 34761

Title PRESIDENT Title DIRECTOR
Name TU, DIEP Name CAJAROP, JEFF

Address 239 CALLIOPE STREET Address 239 CALLIOPE STREET

City-State-Zip: OCOEE FL 34761 City-State-Zip: OCOEE FL 34761

Title OFFICER, TREASURER Title DIRECTOR

NameSUKSAWANG, NAKINNameWHITCOMB, DEANAddress239 CALLIOPE STREETAddress239 CALLIOPE STREET

City-State-Zip: OCOEE FL 34761 City-State-Zip: OCOEE FL 34761

Title DIRECTOR Title VP

NameLEFRANCOIS, SULLIENameMOTIWALA, KHALIDAddress239 CALLIOPE STREETAddress239 CALLIOPE STREETCity-State-Zip:OCOEE FL 34761City-State-Zip:OCOEE FL 34761

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: DIEP T. TU PRESIDENT 01/11/2024