

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000009543

**FILED**  
**May 01, 2018**  
**Secretary of State**  
**CC3067753231**

**Entity Name:** GULF COAST CHAPTER OF THE BUILDING OFFICIALS ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

1001 SARASOTA CENTER BLVD  
SARASOTA, FL 34240

**Current Mailing Address:**

1001 SARASOTA CENTER BLVD  
SARASOTA, FL 34240

**FEI Number: 45-3565298**

**Certificate of Status Desired: No**

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

YANTORNO, GREG  
1001 SARASOTA CENTER BLVD  
SARASOTA, FL 34240 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 D  
Name DUPRE, CARROLL  
Address 1001 SARASOTA CENTER BLVD.  
City-State-Zip: SARASOTA FL 34240

Title D, P  
Name CROTEAU, KATHLEEN  
Address 1001 SARASOTA CENTER BLVD.  
City-State-Zip: SARASOTA FL 34240

Title D, VP  
Name BAILEY, BEN  
Address 1001 SARASOTA CENTER BLVD.  
City-State-Zip: SARASOTA FL 34240

Title D, T  
Name PANCAKE, WILLIAM  
Address 1001 SARASOTA CENTER BLVD.  
City-State-Zip: SARASOTA FL 34240

Title D, S  
Name MCNULTY, SHAWN  
Address 1001 SARASOTA CENTER BLVD  
City-State-Zip: SARASOTA FL 34240

*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: KATHLEEN CROTEAU**

**P**

**05/01/2018**

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

\_\_\_\_\_  
Date