

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25783

Entity Name: I.B.E.W. LOCAL UNION NO. 759 BUILDING CORPORATION**Current Principal Place of Business:**C/O ROBERT A. SUGARMAN
301 N.E. 1ST STREET
POMPANO BEACH, FL 33060-6607**Current Mailing Address:**C/O ROBERT A. SUGARMAN
301 N.E. 1ST STREET
POMPANO BEACH, FL 33060-6607**FEI Number:** 59-6135947**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUGARMAN, ROBERT A
100 MIRACLE MILE
SUITE 300
CORAL GABLES, FL 33134 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	HAYNICK, TIM
Address	301 NE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	VP
Name	BENEVIDES, HECTOR
Address	301 NE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	FINANCIAL SECRETARY
Name	MURPHY, KEITH
Address	301 NE 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	RECORDING SECRETARY
Name	BRUCKER, TIM
Address	301 NE 1 STREET
City-State-Zip:	POMPANO BEACH FL 33060

Title	TREASURER
Name	DUMAS, MARCUS A
Address	C/O ROBERT A. SUGARMAN 301 N.E. 1ST STREET
City-State-Zip:	POMPANO BEACH FL 33060-6607

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: MARCUS DUMAS**TREASURER****03/03/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date