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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 704141 (1)  
1. Corporation Name  
AMERICAN INSTITUTE OF BUILDING DESIGN, FLORIDA SOCIETY, F.R.D.A., INC.

Principal Place of Business

6216 GRAND BLVD.  
NEW PORT RICHEY FL 34652  
US

Mailing Address

PO BOX 709  
ELFERS FL 34680  
US



2. Principal Place of Business

2a. Mailing Address

21 3500 Finch Drive

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27

City & State

23 Melbourne FL

28

24 Zip 32935

Country

25 USA

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREY, BRUCE L.  
6216 GRAND BLVD.  
NEW PT RICHEY FL 34652

81 Name

Barbara Knick

82 Street Address (P.O. Box Number is Not Acceptable)

3500 Finch Drive

83

84 City

Melbourne

FL

85 Zip Code

32935

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Barbara Knick, Treasurer

4/5/96

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD  
BREEFE, LYLE J.  
2804 BLUE FINCH WAY  
NEW PT RICHEY FL

DELETE

VD President  
LUCIA, JAMES  
897 ALTAMONTE DRIVE  
ALTAMONTE SPRGS. FL 32701

DELETE

VD  
SHONE, MARK V.  
513 US HWY #1, ROOM 110  
NO PALM BCH FL

DELETE

SD  
FLEMING, SCOTT  
840 JUPITER PARK DR #109  
JUPITER FL 33458

DELETE

TD  
FREY, BRUCE L.  
6216 GRAND BLVD.  
NEW PT. RICHEY FL

DELETE

VD  
KNICK, BARBARA  
3500 FINCH LANE  
MELBOURNE FL

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara Knick, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/96 407 253 3500

CR2E037 (12/95)