

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704141

FILED  
Mar 12, 2008  
Secretary of State

**Entity Name:** AMERICAN INSTITUTE OF BUILDING DESIGN, FLORIDA SOCIETY, F.R.D.A., INC.

**Current Principal Place of Business:**

7324 OTTER CK DR  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

7324 OTTER CK DR  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

**FEI Number:** 20-8991156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MURPHY, ROBERT A  
7324 OTTER CK DR  
NEW PORT RICHEY, FL 34655 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BRICKER, TIMOTHY J  
Address: 89 N BAY HARBOR  
City-St-Zip: KEY LARGO, FL 33037

Title: DVP ( ) Delete  
Name: HOLLAND, JAMES M  
Address: 1015 STATE RD 436, STE 217  
City-St-Zip: CASSELBERRY, FL 32707

Title: S ( ) Delete  
Name: PILLSBURY, DAVID A  
Address: 1956 JAPONICA RD  
City-St-Zip: WINTER PARK, FL 32792

Title: T ( ) Delete  
Name: MURPHY, ROBERT A  
Address: 7324 OTTER CK DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HOLLAND, JAMES M  
Address: 295 ANCHOR ROAD  
City-St-Zip: CASSELBERRY, FL 32707

Title: DVP (X) Change ( ) Addition  
Name: PILLSBURY, DAVID A  
Address: 1956 JAPONICA RD  
City-St-Zip: WINTER PARK, FL 32792

Title: S (X) Change ( ) Addition  
Name: MEYER, CRAIG L  
Address: 5800 HIGGINBOTHAM ROAD  
City-St-Zip: FT. MYERS, FL 33905

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT A. MURPHY

TR

03/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date