

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704141

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

4439 ASHMONT COURT  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

4439 ASHMONT COURT  
JACKSONVILLE, FL 32258

**New Mailing Address:**

**FEI Number:** 20-8991156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHILDERS, PINARES  
4439 ASHMONT COURT  
JACKSONVILLE, FL 32258 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  
Name: PILLSBURY, DAVID A  
Address: 1956 JAPONICA RD  
City-St-Zip: WINTER PARK, FL 32792

Title: DVP  
Name: WEREMEICHUK, TONY  
Address: 4227 CLEARY WAY  
City-St-Zip: ORLANDO, FL 32828

Title: S  
Name: BERRY, SUSAN P  
Address: 115 EAST FAITH TERRACE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32751

Title: T  
Name: CHILDERS, PINARES  
Address: 4439 ASHMONT COURT  
City-St-Zip: JACKSONVILLE, FL 32258

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: PINARES CHILDERS

T

04/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date