

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90044 002 ****61.25

DOCUMENT # 708424 1. Entity Name NORTHWEST FLORIDA CHAPTER ASSOCIATED GENERAL CONTRACTORS OF AMERICA INC.					
Principal Place of Business 201 S. F STREET PENSACOLA, FL 32501-4527			Mailing Address PO BOX 17108 PENSACOLA, FL 32522		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-1086660	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KELSON, MICHELE B 201 SOUTH "F" STREET PENSACOLA FL, FL 32501			7. Name and Address of New Registered Agent Name James Woodall Street Address (P.O. Box Number is Not Acceptable) 201 South "F" Street City Pensacola FL Zip Code 32501		
8. 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. I am familiar with, and except the obligations of registered agent.					
SIGNATURE <u>James Woodall</u> <u>James L. Woodall</u> <u>2/15/05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, J LARRY 4740 WOODBINE ROAD PACE, FL 32571	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERRY, TERRI J 11 CLARINDA LN PENSACOLA, FL 32505	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Garry Crook P.O. Box 9606 Pensacola, FL 32513	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOOTHE, ROBERT 11 ALICE ST PENSACOLA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD GREEN, NATHAN 3407 W STREET PENSACOLA, FL 32505	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, BILL 4326 GULF BREEZE PKWY GULF BREEZE, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNT, WILLIAM 650 W. OAKFIELD RD. PENSACOLA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <u>James L. Woodall</u> <u>2/15/05</u> <u>950-438-0551</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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