


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 24 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 709554 (0)**  
1. Corporation Name  
**CONTRACTORS & BUILDERS ASSOCIATION OF PINELLAS C  
OUNTY, INC.**

Principal Place of Business <b>7600-66TH STREET NORTH SUITE 200 PINELLAS PARK FL 34665</b>	Mailing Address <b>7600-66TH STREET NORTH SUITE 200 PINELLAS PARK FL 34665</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 <b>33781</b>	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 <b>33781</b>
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3. Date Incorporated or Qualified <b>09/07/1965</b>	4. FEI Number <b>59-0611449</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**FISCHER, RODNEY S.  
7600-66TH STREET NORTH  
SUITE 200  
PINELLAS PARK FL 34665**

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code <b>33781</b>
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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 Rodney S. Fischer, Executive Director 2/2/98  
(NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	<b>QUARTETTI, RALPH</b>
STREET ADDRESS	<b>7600 66TH STREET NORTH 200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	<b>ROSENBLUTH, JIM</b>
STREET ADDRESS	<b>7600 66TH STREET N #200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	<b>SOCKOL, PETER</b>
STREET ADDRESS	<b>7600 66TH STREET NORTH 200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>MAGGIO, FRANK</b>
STREET ADDRESS	<b>7600 66TH ST N #200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>SCHMITT, ALICIA</b>
STREET ADDRESS	<b>7600 66TH STREET NORTH 200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>HABIB, DAVID</b>
STREET ADDRESS	<b>7600 66TH STREET N #200</b>
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>P</b>
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>McAuliffe, Steve</b>
2.3 STREET ADDRESS	<b>7600 66th St. N. #200</b>
2.4 CITY-ST-ZIP	<b>Pinellas Park, FL 33781</b>
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>Tibma, Peter</b>
3.3 STREET ADDRESS	<b>7600 66th St. N. #200</b>
3.4 CITY-ST-ZIP	<b>Pinellas Park, FL 33781</b>
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>VP</b>
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>D</b>
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 any amendment with an address.

SIGNATURE: Ralph Quartetti 2/17/98 813-545-5536

CP2E037 (10/97)