


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 710623</b>					
1. Entity Name <b>SOUTHEAST VOLUSIA KC BUILDING ASSOCIATION INC.</b>					
Principal Place of Business <b>516 SOUTH ORANGE AVENUE NEW SMYRNA BEACH FL 32168</b>			Mailing Address <b>516 SOUTH ORANGE AVENUE NEW SMYRNA BEACH FL 32168</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt #, etc.			Suite, Apt #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>93-0820067</b>	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>ANDREANO, JOSEPH</b> <b>724 GREEN ROAD</b> <b>NEW SMYRNA BEACH FL 32168</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2005</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUKON, MUHAELW		NAME		
STREET ADDRESS	767 FOX HOUND DRIVE		STREET ADDRESS		
CITY- ST- ZIP	PORT ORANGE FL 32128		CITY- ST- ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CATALANO, VINCENT		NAME		
STREET ADDRESS	1203 WAYNE AVE.		STREET ADDRESS		
CITY- ST- ZIP	NEW SMYRNA BEACH FL 32168		CITY- ST- ZIP		
TITLE	DP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AMALFITANO, ALBERT		NAME		
STREET ADDRESS	1531 S RIVERSIDE DR		STREET ADDRESS		
CITY- ST- ZIP	EDGEWATER FL 32132		CITY- ST- ZIP		
TITLE	DT <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SKOWRONSKI, JAMES W		NAME		
STREET ADDRESS	400 SEA GULL CT		STREET ADDRESS		
CITY- ST- ZIP	EDGEWATER FL 32141		CITY- ST- ZIP		
TITLE	DS <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STUDER, FREDERICK		NAME		
STREET ADDRESS	1205 WAYNE AVENUE		STREET ADDRESS		
CITY- ST- ZIP	NEW SMYRNA BEACH FL 32168		CITY- ST- ZIP		
TITLE	DVP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANDRENNO, JOC		NAME		
STREET ADDRESS	724 GREEN RD		STREET ADDRESS		
CITY- ST- ZIP	NEW SMYRNA BEACH FL 32168		CITY- ST- ZIP		



1st MOORE CR2E037 (10/04)

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/05

386 428-7161

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