

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715803

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** SOUTH FLORIDA CHAPTER OF THE ASSOCIATED GENERAL CONTRACTORS

**Current Principal Place of Business:**

1395 SHOTGUN ROAD  
SUNRISE, FL 33326 US

**New Principal Place of Business:**

**Current Mailing Address:**

1395 SHOTGUN ROAD  
SUNRISE, FL 33326 US

**New Mailing Address:**

FEI Number: 59-0455099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLS, LEONARD D  
1395 SHOTGUN ROAD  
SUNRISE, FL 33326 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: PRES  
Name: MUNILLA, JORGE  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

Title: VP  
Name: MILLER, ROBERT W  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

Title: V  
Name: TAYLOR, MICHAEL  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

Title: D  
Name: CARMELO, TOMAS  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

Title: D  
Name: ROACH, DAVID  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

Title: D  
Name: BUNNELL, GEOFF  
Address: 1395 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326 US

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: LEONARD D. MILLS

EVP

01/04/2010

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

\_\_\_\_\_  
Date