2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718133

Jan 27, 2012 Secretary of State

Entity Name: TAMPA AREA ELECTRICAL JOINT APPRENTICESHIP AND TRAINING TRUST FUND BUILDING

CORPORATION, INC.

Current Principal Place of Business:

TRAINING TRUST FUND BUILDING CORP., INC.

5625 HARNEY ROAD

TAMPA, FL 33610

Current Mailing Address:

TRAINING TRUST FUND BUILDING CORP., INC.

5625 HARNEY ROAD

TAMPA, FL 33610

FEI Number: 59-1271446

146 FEI NUI

FEI Number Applied For ()

FEI Number Not Applicable ()

ilbei Not Applicable ()

5625 HARNEY ROAD

TAMPA, FL 33610

5625 HARNEY ROAD

New Mailing Address:

TAMPA, FL 33610

New Principal Place of Business:

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TRAINING TRUST FUND BUILDING CORP., INC.

TRAINING TRUST FUND BUILDING CORP., INC.

MCCRAW, DAVID 5625 HARNEY RD TAMPA, FL 33610

TAMPA, FL 33610 US

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: CD

Name: GRACE, MICHAEL

Address: 2730 S. FAULKENBURG ROAD

City-St-Zip: RIVERVIEW, FL 33569

Title: PD

Name: MCCRAW, DAVID Address: 5625 HARNEY RD City-St-Zip: TAMPA, FL 33610

Title: STD

 Name:
 JENKINS, LARRY

 Address:
 703 E. 114TH AVENUE

 City-St-Zip:
 TAMPA, FL 33612

Title: D

Name: KING, RANDALL Address: 4025 TANNER ROAD City-St-Zip: DOVER, FL 33527

Title:

Name: ELLIS, MARK
Address: 8023 APACHE LANE
City-St-Zip: LAKELAND, FL 33809

Title: D

Name: COPPERSMITH, ROBERT
Address: C/O NECA 2103 CASS STREET

City-St-Zip: TAMPA, FL 33606

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: DAVID MCCRAW PD 01/27/2012