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Apr 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **719006** (9)

1. Corporation Name

**FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING
CONTRACTORS ASSOCIATION, INC.**



Principal Place of Business 4111 METRIC DR PO DRAWER 4850 WINTER PARK FL 32792 US	Mailing Address 4111 METRIC DR PO DRAWER 4850 WINTER PARK FL 32792-6829 US
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3. Date Incorporated or Qualified 02/19/1970	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1269842	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent MUNNELL, STEPHEN W 4111 METRIC DR WINTER PARK FL 32792	
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ED MUNNELL, STEPHEN 4111 METRIC DR WINTER PARK FL	1.1 TITLE	☐ Change ☐ Addition
NAME	D GREENE, WILLIAM PO BOX 28069 N/A JACKSONVILLE FL	1.2 NAME	☐ Change ☐ Addition
STREET ADDRESS	D SILVERS, MIKE 2430 30TH AVE N ST PETERSBURG FL	1.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	V BOWEN, BRAD III P O BOX 1237-NA SEBRING FL	1.4 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE	T PURDY, BOB 18 W. STUMPFIELD RD PENSACOLA FL	2.1 TITLE	☐ Change ☒ Addition
NAME	P TURNER, TERRY P O BOX 232 N/A SAN MATEO FL	2.2 NAME	☐ Change ☐ Addition
STREET ADDRESS		2.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	☐ Change ☐ Addition
STREET ADDRESS		3.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	☐ Change ☐ Addition
STREET ADDRESS		4.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	☐ Change ☐ Addition
STREET ADDRESS		5.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	☐ Change ☐ Addition
STREET ADDRESS		6.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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 an attachment with an address.

SIGNATURE: Stephen W. Munnell **Stephen Munnell** 4/8/97 (407) 671-3772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0015483

CR2E037 (9/96)