## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT #719006** 



FILED
Apr 13, 2004 8:00 am
Secretary of State
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04-13-2004 90024 049 \*\*\*\*61.25

FLORIDA CONDITIO	ROOFING, SHEET METAL ONING CONTRACTORS A	L & AIR SSOCIA <sup>-</sup>	ΓΙΟΝ, INC.				0 1 13 200 1	2002101		J1.25
PO DRAWER 4850 PO BOX			IETRIC DR	. US						
2. Principal Place of Business 3. Ma			Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01192004 Chg-NP CR2E037 (10/03)				
City & State		City i	City & State			4. FEI Number Applied For 59-1269842 Not Applicab				
Zip	Country	Zip		Country		5. Certificate of Sta	atus Desired		. <b>75</b> Addi Required	
	6. Name and Address of Current	Registered	Agent			7. Name and Add			nt	
MUNNELL	., STEPHEN W	<u> </u>	<del></del>	Name	·		_ =		<u>۔۔۔۔</u> ،	
4111 METRIC DR WINTER PARK, FL 32792				Street Ad	dress (f	P.O. Box Number is N	lot Acceptable)			
·	,									İ
				City				FL	Zip Code	,
	named entity submits this statement for tions of registered agent.	or the purpos	e of changing its re	gistered office or r	register	ed agent, or both, in	the State of Flor	ida. I am fami	liar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title If applic	able. (NOTE: F	legistered Agent signatun	e required	when reinstating)	<del></del>	DATE		
Filing Fee is \$61.25  9. Election Campaign F Trust Fund Contribut					\$5.00 May Be Added to Fees		ske check pa da Departme			
10.	10. OFFICERS AND DIRECTORS 11.			11.	P	ADDITIONS/CHANGE	S TO OFFICER	S AND DIREC	TORS IN	10
TITLE	ED		Delete	TITLE					Change	Addition
NAME OVEREZ ADDRESO	MUNNELL, STEPHEN			NAME OTREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	4111 METRIC DR WNTER PARK, FL			STREET ADDRESS CITY-ST-ZIP						
TITLE	P		☐ Delete	ππε	-D			)SI	Change	Addition
NAME	SUTTER, STEVE			NAME						
STREET ADDRESS	1763 APEX ROAD			STREET ADDRESS						
CITY-ST-ZIP	SARASOTA, FL 34240			CITY-ST-ZIP						
TITLE NAME	VP CHESHIRE, JIM		☐ Delete	TITLE *	-PD			24	Change	☐ Addition
STREET ADDRESS	PO BOX 547938		,	STREET ADDRESS	-					ę.
CITY-ST-ZIP	ORLANDO, FL 32854			CITY-ST-ZIP						
TITLE	D		Delete		- ST				Change	Addition
NAME	ENGELMEIER, CARL			NAME	- R	ZEGISTER, G 163 SALT M	aey un-valu			
STREET ADDRESS	4800 WOFFORD LN			STREET ADDRESS CITY-ST-ZIP	- (*	RANGE PAR	TRICE CO	NG 		
	1 ADI ANDA EL 33910			01/13-31-21	- O	KANGEIME	. د سار عب			
CITY-ST-ZIP	ORLANDO, FL 32810		[] D-1-4-						Change	☐ Addition
TITLE NAME	PD	<u> </u>	☐ Delete		- P		•		Change	☐ Addition
TITLE	<del> </del>	<u></u>	☐ Delete	TITLE -					Change	☐ Addition
TITLE NAME	PD LUIKART, MELANIE	3	☐ Delete	TITLE -	- P				Change .	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUIKART, MELANIE PO BOX 15636 WEST PALM BEACH, FL 33416 ST	3	☐ Delete	TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE				X	Change Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD LUIKART, MELANIE PO BOX 15636 WEST PALM BEACH, FL 33416 ST SHEWSKI, DAVID	3		TITLE - NAME STREET ADDRESS CITY-ST-ZIP TITLE - NAME -	- P			X		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUIKART, MELANIE PO BOX 15636 WEST PALM BEACH, FL 33416 ST	6		TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE	- P			X		

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.

**SIGNATURE:**