

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90155 031 ****61.25

DOCUMENT # 719006

1. Entity 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 BOX 4850
WINTER PARK, FL 32792 US**

50011070



2. Principal Place of Business

3. Mailing Address

4111 METRIC DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 6

04032006 Chg-NP CR2E037 (11/05)

City & State

City & State

WINTER PARK FL

4. FEI Number
59-1269842

Applied For

Not Applicable

Zip

Country

Zip

Country

32792

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MUNNELL, STEPHEN W
4111 METRIC DR
WINTER PARK, FL 32792**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ED
MUNNELL, STEPHEN
4111 METRIC DR
WINTER PARK, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
CONE, WILLIAM
3601 NW 10TH AVE
FT LAUDERDALE, FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
CHESHIRE, JIM
PO BOX 547938
ORLANDO, FL 32854** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
REGISTER, GARY
1963 SALT MYRTLE LANE
ORANGE PARK, FL 32003** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LUIKART, MELANIE
PO BOX 15636
WEST PALM BEACH, FL 33416** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
SWOPE, KEITH
1700 E. Elliecott St.
TAMPA, FL 33610** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
SHEWSKI, DAVID
6195 E SAWGRASS RD
SARASOTA, FL 34240** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *Stephen W. Munnell* **STEPHEN W MUNNELL** **4/4/06** **407.671.3772**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #