## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#719803** 

FILED Feb 17, 2009 Secretary of State

Entity Name: SHEETMETAL WORKERS LOCAL UNION NO. 32 APPRENTICESHIP AND TRAINING PROGRAM AND TRAINING FUND, INC. **Current Principal Place of Business: New Principal Place of Business:** 20401 N.E. 15TH CT. N. MIAMI BEACH, FL 33179 **Current Mailing Address: New Mailing Address:** 20401 N.E. 15TH CT. N. MIAMI BEACH, FL 33179 FEI Number: 59-1366225 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOOTTEN, WILLIAM R 20401 NE 15TH COURT. MIAMI, FL 33179 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CD () Delete () Change () Addition STEWART, LARRY Name: Name: 20375 NE 15 CT Address: Address: City-St-Zip: N MIAMI BCH, FL 33179 US City-St-Zip: Title: Title: ( ) Delete () Change () Addition BARDEN, JOEL Name: Name: Address: 7571 SW 42ND PLACE Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: () Delete Title: () Change () Addition RUDISILL, JOHN Name: Name: 2530 ALI BABA AVE Address: Address: City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: MEDLIN, WILLIAM Name: 8986 NW 105 WAY Address: Address: City-St-Zip: MEDLEY, FL 33178 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CAMPESTRINI, MARCOS Name: Name: 17901 NW MIAMI COURT Address: Address: City-St-Zip: NORTH MIAMMI BEACH, FL 33169 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition HOLMES, DAVID VILLARRUEL, DANIEL Name: Name: Address: 14945 NW 25 CT. Address: 20375 NE 15 COURT MIAMI, FL 33054 MIAMI, FL 33179 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LARRY STEWART CD 02/17/2009