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Mar 05 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 721889 (4)

1. Corporation Name

NORTHEASTERN FLORIDA CHAPTER, THE ASSOCIATED GENERAL CONTRACTORS OF AMERICA, INC.

Principal Place of Business

Mailing Address

2144 ROSSELLE ST.
JACKSONVILLE FL 32204-3229

2144 ROSSELLE ST.
JACKSONVILLE FL 32204-3229



3. Date Incorporated or Qualified
10/15/1971

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-0662700

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAVEN, JOHN W., JR.
3306 INDEPENDENT SQUARE
JACKSONVILLE FL 32202

81 Name

F&L Corp.

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

200 Laura Street

83

84 City

Jacksonville

FL

85 Zip Code
32202

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

Charles V. Hedrick

Charles V. Hedrick as signatory for F&L Corp.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME JOHNSON, JIM
STREET ADDRESS 4651 SALISBURY RD STE 193
CITY-ST-ZIP JACKSONVILLE FL

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME KATHY BARCO
1.3 STREET ADDRESS 7587 WILSON BLVD.
1.4 CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE TD ☐ DELETE
NAME SGROI, STEVE
STREET ADDRESS 4501 BEVERLY AVE
CITY-ST-ZIP JACKSONVILLE FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE EVD ☐ DELETE
NAME HALL, STEVE
STREET ADDRESS 2144 ROSSELLE ST
CITY-ST-ZIP JACKSONVILLE FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: *Charles V. Hedrick*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)