

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725569 (8)

1. Corporation Name

BUILDING INDUSTRY ASSOCIATION OF PASCO COUNTY, I
NC.

Principal Place of Business

Mailing Address

20246 ST RD 54
LUTZ FL 33549
US20246 ST RD 54
LUTZ FL 33549-7850
US3. Date Incorporated or Qualified
02/16/19733a. Date of Last Report
01/29/1996

2. Principal Place of Business

2a. Mailing Address

21 (same as above)

26 (same as above)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1354549

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

City & State

City & State

22

27

Zip

Country

Zip

Country

23

28

6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. 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

SHELTON, ROBERT
20246 ST RD 54
LUTZ FL 33549

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ED
NAME SHELTON, BOB
STREET ADDRESS 20246 ST RD 54
CITY-ST-ZIP LUTZ FL☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP☐ Change☐ AdditionTITLE P
NAME MURPHY, BENTON R
STREET ADDRESS 3004 RHETT COURT
CITY-ST-ZIP TAMPA FL☒ DELETE2.1 TITLE P
2.2 NAME Aldridge, Daniel E.
2.3 STREET ADDRESS 43309 U.S. 19 No.
2.4 CITY-ST-ZIP Tarpon Springs, FL 34689☒ Change☐ AdditionTITLE T
NAME LUBINSKI, JEAN
STREET ADDRESS 13810 CHERRY CREEK DR
CITY-ST-ZIP TAMPA FL☐ DELETE3.1 TITLE S
3.2 NAME Lubinski, Jean
3.3 STREET ADDRESS 13810 Cherry Creek Dr.
3.4 CITY-ST-ZIP Tampa, FL 33688☒ Change☐ AdditionTITLE S
NAME PALMER, JAN
STREET ADDRESS 17935 U S 19
CITY-ST-ZIP HUDSON FL☐ DELETE4.1 TITLE T
4.2 NAME Khoyi, Dara
4.3 STREET ADDRESS 10012 Fountain Court
4.4 CITY-ST-ZIP New Port Richey, FL 34654☒ Change☐ AdditionTITLE V
NAME BROWN, LARRY
STREET ADDRESS 5802 N OCCIDENT ST
CITY-ST-ZIP TAMPA FL☐ DELETE5.1 TITLE V
5.2 NAME Greene, David
5.3 STREET ADDRESS 8620 Cypress Lakes Blvd.
5.4 CITY-ST-ZIP New Port Richey, FL 34653☒ Change☐ AdditionTITLE D
NAME KHOYI, DARA
STREET ADDRESS 7720 MASSACHUSETTS AVE
CITY-ST-ZIP NEW PORT RICHEY FL☐ DELETE6.1 TITLE D
6.2 NAME Kowalisyn, Jim
6.3 STREET ADDRESS 11913 St. Rd. 54
6.4 CITY-ST-ZIP Odessa, FL 33556☒ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Shelton

01/06/97 (813)948-6688

Date

Daytime Phone # 0045916

CF2E037 (9/96)