

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727667

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** BUILDERS ASSOCIATION OF NORTH CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2217 NW 66TH COURT  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

**Current Mailing Address:**

2217 NW 66TH COURT  
GAINESVILLE, FL 32653 US

**New Mailing Address:**

**FEI Number:** 59-1444544      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARPENTER, RONALD A  
5608 NW 43RD ST  
GAINESVILLE, FL 32653 US

**Name and Address of New Registered Agent:**

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:**

Title: PD  
Name: OELRICH, IVAN  
Address: 25275 NW 8TH PL, SUITE 50  
City-St-Zip: NEWBERRY, FL 32669

Title: VD  
Name: RUTAN, RENE  
Address: 2590 N. 12TH AVENUE  
City-St-Zip: PENSACOLA, FL 32503

Title: VD  
Name: HILMAN, DAVID  
Address: 3700 NW 91ST STREET, SUITE D400  
City-St-Zip: GAINESVILLE, FL 2606

Title: TD  
Name: WEBSTER, MATT  
Address: 8200 NW 15TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: SD  
Name: PURVIS, MARGARITA  
Address: 4566 NW 5TH BLVD SUITE N  
City-St-Zip: GAINESVILLE, FL 32609

I hereby 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 all other like empowered.

SIGNATURE: IVAN OELRICH

PD

04/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date