2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728828

FILED May 02, 2005 Secretary of State

Entity Name: FLORIDA CONSTRUCTION USERS ROUNDTABLE, INC.

	rincipal Place of Business:	New Principal Place of Business:
P.O. BOX LAKELAN	5104 D, FL 33807	
Current N	lailing Address:	New Mailing Address:
P.O. BOX LAKELAN	5104 D, FL 33807	
In accordan	: 59-1487806 FEI Number Applied For () FEI nce with s. 607.193(2)(b), F.S., the corporation did not rece I Address of Current Registered Agent:	Number Not Applicable () Certificate of Status Desired () ve the prior notice. Name and Address of New Registered Agent:
LYON, FR 1031 W. M SUITE 170 WINTER F	ED MORSE BLVD.) PARK, FL 32789 US	
	e named entity submits this statement for the purpor e of Florida.	e of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registered Agent	Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	VP () Delete MCKENNA, DANIEL J PO BOX 11013 CINCINNATI, OH 45211	Title: D (X) Change () Addition Name: MCKENNA, DANIEL J Address: PO BOX 11013 City-St-Zip: CINCINNATI, OH 45211
		-
Name: Address:	SD () Delete COBB, RON P.O. BOX 14910 BRADENTON, FL 34280	Title: () Change () Addition Name: Address: City-St-Zip:
Name: Address: City-St-Zip: Title: Name: Address:	COBB, RON P.O. BOX 14910	Title: () Change () Addition Name: Address:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	COBB, RON P.O. BOX 14910 BRADENTON, FL 34280 PD () Delete DUFFY, PATRICK C 702 N. FRANKLIN ST.	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	COBB, RON P.O. BOX 14910 BRADENTON, FL 34280 PD () Delete DUFFY, PATRICK C 702 N. FRANKLIN ST. TAMPA, FL 33601 VP () Delete WESTBERRY, PAUL 1041 EAST BUTLER ROAD	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICK C DUFFY PD 05/02/2005