

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90133 023 \*\*\*\*61.25

**DOCUMENT # 731419**

1. Entity Name

**ELECTRICAL WORKERS BUILDING ASSOCIATION, OF PINE  
LLAS COUNTY, FLORIDA, INC.**



Principal Place of Business

**1401 9TH AVE. NO.  
SAINT PETERSBURG FL 33705**

Mailing Address

**1401 9TH AVE. NO.  
SAINT PETERSBURG FL 33705**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1296796**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



**6. Name and Address of Current Registered Agent**

**RUNKLE, JACK P JR  
741-8TH ST N#1  
SAINT PETERSBURG FL 33701**

**7. Name and Address of New Registered Agent**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **RUNKLE, JACK P. JR.**  
CITY-ST-ZIP **741-8TH ST NORTH #1  
SAINT PETERSBURG FL 33701**

TITLE ☐ Delete  
NAME **VPD**  
STREET ADDRESS **RUCKDESCHER, MARTIN V**  
CITY-ST-ZIP **7758 53RD ST NORTH  
PINELLAS PARK FL 33781**

TITLE ☐ Delete  
NAME **BM**  
STREET ADDRESS **KRONZ, HAROLD C**  
CITY-ST-ZIP **11755-87TH AVE. NORTH  
SEMINOLE FL 34642**

TITLE ☐ Delete  
NAME **TD**  
STREET ADDRESS **LENAS, STANLEY JR**  
CITY-ST-ZIP **2202-80TH STREET NORTH  
ST. PETERSBURG FL 33710**

TITLE ☐ Delete  
NAME **SD**  
STREET ADDRESS **YATES, GERALD B**  
CITY-ST-ZIP **9509 N118TH LANE N.  
SEMINOLE FL 34642**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**President, February 4, 2003 (727)898-2802**

Date Daytime Phone #

CR2E037 (10/02)