

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **746225** (2)

1. Corporation Name

THE BUILDING OFFICIALS AND INSPECTORS ASSOCIATION OF BROWARD COUNTY



Principal Place of Business

1126 S FED HWY
#394
FT LAUDERDALE FL 33316
US

Mailing Address

C/O William Dumbaugh
~~C/O CLARK RICHARDS~~
1126 S FED HWY S394
FT LAUDERDALE FL 33316
US

3. Date Incorporated or Qualified
03/13/1979

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

4. FEI Number
59-2647099

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

DUMBAUGH, WILLIAM
9530 W SAMPLE RD
CORAL SPRINGS FL 33065

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

William Dumbaugh

William Dumbaugh

4-30-96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BESSELL, MICHAEL
401 NW 70 TERR
PLANTATION FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
DUMBAUGH, BILL
9530 W SAMPLE RD
CORAL SPRINGS FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BRANDT, JOHN
7525 NW 88 AVE
TAMARAC FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
ANDERSON, RICK
7525 NW 88 AVE
TAMARAC FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
BERTOMLAMI, MARGARET
6500 PARKSIDE DR
PARKLAND FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SIANO, LOUIS
11620 NW 19 DR
CORAL SPGS FL ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PRESIDENT
BERTOMLAMI, MARGARET
6500 PARKSIDE DRIVE
PARKLAND FLORIDA 33067 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VP
DESHARNAIS, GEORGE JR.
10100 PINES BLVD.
PEMBROKE PINES, FL. 33026 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
TREASURER
HANNON, ROBERT
9530 W. SAMPLE ROAD
CORAL SPRINGS, FL. 33065 ☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
V.P.#2
COTLER, CHRIS
3801 N. UNIVERSITY DRIVE #401
SUNRISE, FLORIDA 33351 ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
EXEC. SECRETARY
Bill Dumbaugh
9530 WEST SAMPLE ROAD
CORAL SPRINGS, FL. 33065 ☒ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
DIRECTOR
BUTLER, JOHN
2600 HOLLYWOOD BLVD.
HOLLYWOOD FL. 33022 ☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

William Dumbaugh *William Dumbaugh*

4-30-96 (954) 344-1023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)