

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767962

FILED  
Apr 13, 2007  
Secretary of State

**Entity Name:** THE FLORIDA SOUTHWEST CHAPTER OF THE CONSTRUCTION SPECIFICATION INSTITUTE, INC.

**Current Principal Place of Business:**

2503 DEL PRADO BLVD, STE 200  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

2503 DEL PRADO BLVD, STE 200  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 53-2402938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELVIN, RONALD J  
2503 DEL PRADO BLVD, STE 200  
CAPE CORAL, FL 33904 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: P ( ) Delete  
Name: MELVIN, RONALD J RA CSI  
Address: 2503 DEL PRADO BLVD, STE 200  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: PE ( ) Delete  
Name: BUSCHLE, KEN CSICCS  
Address: 43 BARKLEY CIRCLE, STE 202  
City-St-Zip: FORT MYERS, FL 33907

Title: 1VP ( ) Delete  
Name: GERALD, JOHN H CSI  
Address: 909 SE 47TH TERR, STE 204  
City-St-Zip: CAPE CORAL, FL 33904

Title: 2VP ( ) Delete  
Name: PICKENS, DEBORAH L CSI  
Address: 18466 LIMBERLOS AVE  
City-St-Zip: PORT CHARLOTTE, FL

Title: S ( ) Delete  
Name: HOUP, KENNETH M CSI  
Address: 4460-1 CAMINO REAL WAY  
City-St-Zip: FT MYERS, FL 33912

Title: T ( ) Delete  
Name: HORN, BAYARD G CSI CDT  
Address: 3520 METRO PKWY  
City-St-Zip: FORT MYERS, FL 33916

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 Chapter 119, 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: RONALD J. MELVIN

P

04/13/2007

Electronic Signature of Signing Officer or Director

Date