

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90077 044 ****70.00

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1. Entity Name
SYSTEM COUNCIL U-4, BUILDING CORPORATION



Principal Place of Business
3944 FLORIDA BLVD
STE 202
PALM BCH GARDENS, FL 33410 US

Mailing Address
3944 FLORIDA BLVD.
PALM BEACH GARDENS, FL 33410

40034100



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2302768

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMPSON, BRIAN K
4272 S.W. BROOKSIDE DR
PALM CITY, FL 34990

Name
Gary J. Aleknavich
Street Address (P.O. Box Number is Not Acceptable)
1062 S.E. Seagrass Avenue
City Port St. Lucie FL Zip Code 34987

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

Filing Fee is \$61.25
Due by May 1, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☒ Delete
NAME ARROWOOD, JR, D.W.
STREET ADDRESS 80 FENIMORE LANE
CITY-ST-ZIP PALM COAST, FL 32137

TITLE VD ☒ Change ☐ Addition
NAME M. MacNichol
STREET ADDRESS 13661 S.E. 46 St
CITY-ST-ZIP Okeechobee, FL 34974

TITLE S ☐ Delete
NAME BRENNAN, J.M.
STREET ADDRESS 1901 MICHELANGO AVENUE
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE D ☒ Change ☐ Addition
NAME D..W. Arrowood
STREET ADDRESS 80 Fenimore Lane
CITY-ST-ZIP Palm Coast, FL 32137

TITLE D ☐ Delete
NAME MIXON, W.W.
STREET ADDRESS 5144 TURTLE CREEK PLACE
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE D ☐ Change ☐ Addition
NAME J. R. Dickinson
STREET ADDRESS Rt 2, Box 780
CITY-ST-ZIP St. George, GA 31646

TITLE D ☒ Delete
NAME SKILLAS, G.A.
STREET ADDRESS 1516 SE 6TH STREET
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE D ☐ Change ☒ Addition
NAME T. J. Haynick
STREET ADDRESS 745 N. Crescent Drive
CITY-ST-ZIP Hollywood, Florida 33021

TITLE PD ☐ Delete
NAME MATTOX, D.A.
STREET ADDRESS 4300 NW 185TH STREET
CITY-ST-ZIP MIAMI, FL 33055

TITLE D ☐ Change ☐ Addition
NAME R. J. Bennett Jr.
STREET ADDRESS 2702 W. Cypress Avenue, S.E.
CITY-ST-ZIP Ft Myers, FL 33905

TITLE D ☒ Delete
NAME MARTIN, R.L.
STREET ADDRESS 12104 TIMBERLAKE ROAD
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE TD ☒ Change ☐ Addition
NAME R. L. Martin
STREET ADDRESS 12104 Timberlake Road
CITY-ST-ZIP Riverview,

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Russell L Martin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06 813 6776662
Date Daytime Phone #

ATTACHMENT

4005 2731
7688 22

D
J. J. Farrlley
226 Odham Drive
Sanford, Flroida 32773

D
R. A. McMahon
P. O. Box 540911
Lake Worth, Florida 33454

D
D. R. Garner
P. O. Box 243
San Mateo, Florida 32189

D
M. R. Sexton
3091 Ohio Street
Melbourne, Florida 32904