## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005495

FILED Jan 08, 2009 Secretary of State

Entity Name: METAL SERVICE CENTER INSTITUTE-FLORIDA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
JAMES BO 907 S 20TH TAMPA, FL	H ST				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
JAMES BO 907 S 20TH TAMPA, FL	H ST				
FEI Number:	16-1637687	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address o	f Current Registered Agent:	Name and Address	of New Registered Agent:	
MOONEY, NICHOLAS F ESQ. 100 S ASHLEY STE #100 TAMPA, FL 33614 US				MOONEY, NICHOLAS F ESQ. 201 E. KENNEDY BLVD TAMPA, FL 33602 US	
The above in the State		ry submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATURE:				01/08/2009	
	Electr	onic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VAN MALSS 147 DENNAI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P WALMSLEY 5208 24TH A TAMPA, FL	VE S	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP RICHARDSC 6901 E 6TH TAMPA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ROGERS, S POB 31328 TAMPA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D BOEDEKER 907 S. 20TH TAMPA, FL	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JAMES BOEDEKER TREA 01/08/2009