2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005495

FILED Apr 30, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

DANNY BOZART 2000 WINWOOD LANE

3040 GANDY BOULEVARD SOUTH C/O KEN CORTELLO, A.M.I.C.O. ST PETERSBURG, FL 33702 US LAKELAND, FL 33813 US

Current Mailing Address: New Mailing Address:

DANNY BOZART 2000 WINWOOD LANE

3040 GANDY BOULEVARD SOUTH C/O KEN CORTELLO, A.M.I.C.O. ST PETERSBURG, FL 33702 US LAKELAND, FL 33813 US

FEI Number: 16-1637687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOZART, DANNY B TREASUR

3040 GANDY BOULEVARD SOUTH

5040 GANDY BOULEVARD SOUTH

5050 NORTH TAMPA STREET

ST PETERSBURG, FL 33702 US SUITE 200 TAMPA, FL 33602 US

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: MORGAN STREETMAN PRESIDENT STREETMAN LAW 04/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: PICKETT, PAUL

Address: 4221 W. BOY SCOUT BLVD City-St-Zip: TAMPA, FL 33607 US

Title: VP

Name: BROWN, MIKE

Address: 5208 24TH AVENUE SOUTH City-St-Zip: TAMPA, FL 33619 US

Title: S

Name: PIERCE, JULIE
Address: 2736 EAST HANNA
City-St-Zip: TAMPA, FL 33610 US

Title: T

Name: CORTELLO, KEN
Address: 2000 WINWOOD LANE
City-St-Zip: LAKELAND, FL 33813 US

Title: D

 Name:
 RICHARDSON, CORDREANNE

 Address:
 6901 EAST 6TH AVENUE

 City-St-Zip:
 TAMPA, FL 33619 US

Title:

Name: REMSEN, MARK

Address: 590 BEAUTYREST AVENUE City-St-Zip: JACKSONVILLE, FL 32254 US

I hereby 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 all other like empowered.

SIGNATURE: CORDREANNE RICHARDSON D 04/30/2012