## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02617

FILED Mar 25, 2006 Secretary of State

Entity Name: NORTH FLORIDA CHAPTER, ASSOCIATED BUILDERS AND CONTRACTORS, INC.

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

1535 KILLEARN CTR BLVD SUITE B-1 TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

1535 KILLEARN CTR BLVD SUITE B-1 TALLAHASSEE, FL 32309

FEI Number: 59-2372025 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:

PELHAM, MARTHA T
1535 KILLEARN CTR BLVD
SUITE B-1
TALLAHASSEE, FL 32308 US

PELHAM, MARTHA T
1535 KILLEARN CTR BLVD
SUITE B-1
TALLAHASSEE, FL 32308 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: MARTHA T. PELHAM 03/25/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: C (X) Change () Addition

Name: STOUT, GARY Name: BULLOCH, CAMP
Address: 5121 BLOUNTSTOWN HIGHWAY Address: P. O. BOX 4276

City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: TALLAHASSEE, FL 32315

 Name:
 WEBB, SUTTON
 Name:
 WEBB, SUTTON

 Address:
 P O BOX 12668
 Address:
 P O BOX 12668

City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: TALLAHASSEE, FL 32317

Title: VC ( ) Delete Title: T (X) Change ( ) Addition

Name: BULLOCH, CAMP Name: SILVER, ALAN

Address: P O BOX 4276 Address: 1616 METROPOLITAN CIRCLE, SUITE E City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip: TALLAHASSEE, FL 32308

Title: PCEO ( ) Delete Title: PC (X) Change ( ) Addition

Name: PECHAM, MARTHA Name: STOUT, GARY P

Address: 1535 KILLEARN CENTER BLVD, B1 Address: 5121 BLOUNTSTOWN HIGHWAY City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32304

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: MARTHA PELHAM PRES 03/25/2006