2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N02617

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-2372025 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PELHAM, MARTHA T
1535 KILLEARN CTR BLVD
SUITE B-1
TALLAHASSEE, FL 32309 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: C ( ) Delete
Name: STOUT, GARY
Address: 5124 BLOUNTSTOWN HIGHWAY
City-St-Zip: TALLAHASSEE, FL 32304

Title: VC ( ) Delete
Name: SANDERS, DAVID
Address: 4742 BLUNTSTOWN HIGHWAY
City-St-Zip: TALLAHASSEE, FL 32304

Title: S ( ) Delete
Name: LESTER, CHUCK
Address: 1080 COMMERCE BLVD
City-St-Zip: TALLAHASSEE, FL 32304

Title: PC ( ) Delete
Name: WEBB, SUTTON
Address: PO BOX 12668
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition
Name: SANDERS, DAVID
Address: 4742 BLOUNTSTOWN HIGHWAY
City-St-Zip: TALLAHASSEE, FL 32304

Title: VC (X) Change ( ) Addition
Name: LESTER, CHUCK
Address: 1080 COMMERCE BLVD.
City-St-Zip: TALLAHASSEE, FL 32343

Title: S (X) Change ( ) Addition
Name: ZETTLE, BRIAN
Address: 1979 MARYLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32303

Title: PC (X) Change ( ) Addition
Name: STOUT, GARY
Address: 5124 BLOUNTSTOWN HIGHWAY
City-St-Zip: TALLAHASSEE, FL 32304

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: MARTHA T. PELHAM PRES 03/24/2009

Electronic Signature of Signing Officer or Director — Date