

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004751

FILED  
May 01, 2009  
Secretary of State

Entity Name: NATIONAL PLASTERERS COUNCIL, INC.

## Current Principal Place of Business:

2811 TAMIAMI TRAIL  
SUITE P  
PORT CHARLOTTE, FL 33952

## New Principal Place of Business:

## Current Mailing Address:

2811 TAMIAMI TRAIL  
SUITE P  
PORT CHARLOTTE, FL 33952

## New Mailing Address:

FEI Number: 33-0569026      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BROOKS, MITCHELL T  
258 BANGSBERG ROAD  
PORT CHARLOTTE, FL 33952      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: D ( ) Delete  
Name: STILL, SHAWN  
Address: 727 WEST PEACHTREE STREET  
City-St-Zip: NORCROSS, GA 30071 US

Title: D ( ) Delete  
Name: ANDERSON, DANA  
Address: 24008 SW MORGAN LANE  
City-St-Zip: SHERWOOD, OR 97140 US

Title: S, T ( ) Delete  
Name: KOHLHAS, MICHAEL  
Address: 2 LANCASTER PARKWAY  
City-St-Zip: LANCASTER, NY 14086 US

Title: VP ( ) Delete  
Name: COOKE, DAVID  
Address: 647 SULLIVAN AVENUE  
City-St-Zip: SOUTH WINDSOR, CT 06074 US

Title: P ( ) Delete  
Name: SMITH, ALAN  
Address: 1767 NORTH BATAVIA  
City-St-Zip: ORANGE, CA 92865 US

Title: PP ( ) Delete  
Name: EATON, JAY  
Address: 2142 EAST JEFFERSON  
City-St-Zip: PHOENIX, AZ 85034 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SCHREIFER, STEPHEN  
Address: 36074 EMERALD COAST HIGHWAY  
City-St-Zip: DESTIN, FL 32541 US

Title: D (X) Change ( ) Addition  
Name: CHIAPELLI, ROBERT  
Address: 107 BUCKWALTER ROAD  
City-St-Zip: ROYERSFORD, PA 19468 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALAN SMITH

DP

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date