

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009482

FILED
Apr 24, 2007
Secretary of State

Entity Name: U.S. GREEN BUILDING COUNCIL - FLORIDA GULF COAST CHAPTER, INC.

Current Principal Place of Business:

12032 BREWSTER DR.
TAMPA, FL 336262500

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 23603
TAMPA, FL 336233603

New Mailing Address:

FEI Number: 84-1658935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
4221 W. BOY SCOUT BLVD.
TAMPA, FL 336075736 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: TOPPE, JONATHAN R
Address: 210 14TH AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D () Delete
Name: MANTRI, ADVAIT
Address: 12032 BREWSTER DR
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: DAVIS, CHRISTOPHER
Address: 302 KNIGHTS RUN AVE, SUITE 900
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: KUNZ, JENNIFER
Address: 1300 PELHAM RD.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: CARLSON, MICHAEL
Address: 741 SOUTH ORANGE AVE.
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: SOUZA, JOE
Address: 12032 BREWSTER DR.
City-St-Zip: TAMPA, FL 336262500

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MANTRI, ADVAIT
Address: 12032 BREWSTER DR
City-St-Zip: TAMPA, FL 33626

Title: D (X) Change () Addition
Name: SOUZA, JOE
Address: 4208 FOXRIDGE BLVD
City-St-Zip: ZEPHYRHILLS, FL 33543

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

Title: D (X) Change () Addition
Name: BOMSTEIN, JOSHUA M
Address: 620 DREW STREET
City-St-Zip: CLEARWATER, FL 33755

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 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: CHRISTOPHER LEE DAVIS

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date