## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05698

FILED Jan 19, 2006 Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER OF THE AMERICAN CONCRETE INSTITUTE, INC.

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

P. O. BOX 540836 ORLANDO, FL 32854

Current Mailing Address: New Mailing Address:

P. O. BOX 540836 ORLANDO, FL 32854

FEI Number: 59-2481318 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:

SCHUCHMANN, JONATHON T PE
C/O TLC ENGINEERING
1717 SOUTH ORANGE AVE. SUITE 300

TU, DIEP T P
3030 DADE AVENUE
ORLANDO, FL 32804
US

ORLANDO, FL 32806 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: DIEP TU 01/19/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PPD ( ) Delete Title: P (X) Change ( ) Addition

Name:SCHUCHMANN, JONATHONName:TU, DIEP T PAddress:1717 SOUTH ORANGE AVE SUITE 300Address:3030 DADE AVENUE

City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32804

Title: PD () Delete Title: V (X) Change () Addition Name: DILLON, TIM Name: ROBINSON, CHRISTOPHER Address: 17237 EAST STATE ROAD 50 Address: 850 COURTLAND ST., SUITE B1

Address: 17237 EAST STATE ROAD 50 Address: 850 COURTLAND ST., SUITE B1
City-St-Zip: BITHLO, FL 32820 City-St-Zip: ORLANDO, FL 32804

Title: BM ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 BRIEL, SHAWN
 Name:
 MOODY, GREG

 Address:
 850 COURTLAND ST., STE. B1
 Address:
 1300 S. LUCAS STREET

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 LEESBURG, FL 34748

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

Name: VARGAS, JOSE
Address: Address: 300 S. ORANGE AVENUE, SUITE 1400

 Address:
 Address:
 300 S. ORANGE AVENUE, SUITE 1400

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32801

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

Name: Name: MOTIWALA, KHALID

Address: Address: 2301 MAITLAND CENTER PKWY, SUITE 300

City-St-Zip: City-St-Zip: MAITLAND, FL 32751

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

 Name:
 Name:
 DELEON, RALPH

 Address:
 Address:
 331 BENSON JCT. ROAD

 City-St-Zip:
 City-St-Zip:
 DEBARRY, FL 32753

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: DIEP TU P 01/19/2006