

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006579

FILED
Feb 21, 2008
Secretary of State

Entity Name: TREASURE COAST LICENSED ROOFING & SHEET METAL ASSOCIATION, INC.

Current Principal Place of Business:

835 33RD CT SW
VERO BEACH, FL 32968

New Principal Place of Business:

Current Mailing Address:

PO BOX 651246
VERO BEACH, FL 32965

New Mailing Address:

FEI Number: 20-5064718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICONA, VERONICA L
835 33RD CT. SW
VERO BEACH, FL 32968 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: P () Delete
Name: LICONA, VERONICA L
Address: 835 33RD CT SW
City-St-Zip: VERO BEACH, FL 32968

Title: VP/T () Delete
Name: PARKS, JIM
Address: 5920 OLD DIXIE HWY
City-St-Zip: VERO BEACH, FL 32967

Title: S () Delete
Name: CHIARELLA, JOE
Address: 2045 14TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: MERCURI, BRIAN
Address: 701 S. MARKET AVE
City-St-Zip: FT. PIERCE, FL 34982

Title: D () Delete
Name: LONG, CHRISTOPHER
Address: 6770 OLD DIXIE HWY
City-St-Zip: FT. PIERCE, FL 34949

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LICONA, VERONICA L
Address: 835 33RD CT SW
City-St-Zip: VERO BEACH, FL 32968

Title: P (X) Change () Addition
Name: PARKS, JIM
Address: 5920 OLD DIXIE HWY
City-St-Zip: VERO BEACH, FL 32967

Title: VP (X) Change () Addition
Name: MC KUHEN, RICHARD
Address: 2100 A SW CONANT AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953

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

Title: S (X) Change () Addition
Name: LONG, CHRISTOPHER
Address: 6771 NO. OLD DIXIE HWY
City-St-Zip: FT. PIERCE, FL 34949

Title: T () Change (X) Addition
Name: RUANE, PAT
Address: 5400 GLADES CUTOFF ROAD
City-St-Zip: FORT PIERCE, FL 34981

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: CHRISTOPHER A. LONG

S

02/21/2008

Electronic Signature of Signing Officer or Director

Date