2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N08862

Entity Name: CHARLOTTE-DESOTO BUILDING INDUSTRY ASSOCIATION, INC.

Current Principal Place of Business:

17984 TOLEDO BLADE BLVD.
PORT CHARLOTTE, FL 339481021

New Principal Place of Business:

Current Mailing Address:

17984 TOLEDO BLADE BLVD.
PORT CHARLOTTE, FL 339481021

New Mailing Address:

FEI Number: 59-2472469 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDER, JAMES T JR.
17984 TOLEDO BLADE BLVD.
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

THORNBERRY, THOMAS J
17984 TOLEDO BLADE BLVD.
PORT CHARLOTTE, FL 33948 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: THOMAS J THORNBERRY 04/14/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: WEBER, JOSEPH
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: PDC ( ) Delete
Name: SANDERS, JR, JAMES T
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: TD ( ) Delete
Name: THORNBERRY, THOMAS J
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MD ( ) Delete
Name: TUCKER, KARIN L
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change ( ) Addition
Name: BYRD, JENNIFER
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: PRES (X) Change ( ) Addition
Name: THORNBERRY, THOMAS J
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP (X) Change ( ) Addition
Name: TRUEX, WILLIAM CGB,CGP
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: EO (X) Change ( ) Addition
Name: TUCKER, KARIN L
Address: 17984 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

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: KARIN L TUCKER EO 04/14/2009
Electronic Signature of Signing Officer or Director Date