

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005688

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** PILE DRIVING CONTRACTORS ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

1857 WELLS ROAD  
SUITE 214  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

1857 WELLS ROAD  
SUITE 215  
ORANGE PARK, FL 32073

**Current Mailing Address:**

1857 WELLS ROAD  
SUITE 214  
ORANGE PARK, FL 32073

**New Mailing Address:**

1857 WELLS ROAD  
SUITE 215  
ORANGE PARK, FL 32073

**FEI Number:** 27-0344628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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  
Name: HOGAN, VAN  
Address: 3375 AGRICUTURAL CENTER DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D  
Name: WAUGH, KEITH  
Address: 925 THOMAS AVENUE  
City-St-Zip: LEESBURG, FL 34748

Title: D  
Name: WILLIAMS, KYLIE  
Address: 1801 LEE ROAD, SUITE 210  
City-St-Zip: WINTER PARK, FL 32789

Title: D  
Name: CARTER, MICHAEL  
Address: 467 LAKE HOWELL DR SUITE 104  
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL CARTER

MR.

03/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date