

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N14862

1. Entity Name

ASSOCIATIONS OF BUILDERS AND CONTRACTORS INSTITU

Principal Place of Business

4700 NW 2ND AVE
BOCA RATON FL 33431
US

Mailing Address

4700 NW 2ND AVE
BOCA RATON FL 33431-4878
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2714096

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOSTER, DWIGHT L.
4700 NW 2ND AVENUE
BOCA RATON FL 33431

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

DWIGHT L. FOSTER

4/25/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☐ Delete
NAME STRATON, JIM
STREET ADDRESS 7546 ENTERPRISE DR
CITY-ST-ZIP WPB FL 33404

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME BRADFORD, MIKE
STREET ADDRESS 7950 S MILITARY TR., STE 105
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME GRIFIN, WARREN
STREET ADDRESS 10850 SE LENNARD ROAD
CITY-ST-ZIP PORT ST LUCIE FL 34952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME KATULKA, MICHAEL A
STREET ADDRESS 3949 SW 12TH COURT
CITY-ST-ZIP FT LAUDERDALE FL 33312

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE M ☐ Delete
NAME FOSTER, DWIGHT
STREET ADDRESS 4700 NW 2 AVE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME DAVIS, CHARLES I SR
STREET ADDRESS 4700 NW 2ND AVE
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☒ Change ☐ Addition
NAME PAUL J. DEL/VECCHIO
STREET ADDRESS 1181 S. ROGERS CIRCLE, #22
CITY-ST-ZIP BOCA RATON, FLORIDA 33487

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DWIGHT L. FOSTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00

Date

561-994-2640

Daytime Phone #

CR2E037 (9/99)