

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 05, 2007
Secretary of State**

DOCUMENT# N19668

Entity Name: ASBESTOS WORKERS LOCAL 60 HOLDING COMPANY, INC.

Current Principal Place of Business:

AWLU #60
13000 NW 47 AVENUE
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

AWLU #60
13000 NW 47 AVENUE
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 59-0731419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NIBLOCK, LANCE
13000 NW 47 AVE.
OPA-LOCKA, FL 33054 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: BM () Delete
Name: WILLIAMS, GARRY
Address: 13000 NW 47TH AVE
City-St-Zip: OPA LOCKA, FL

Title: P () Delete
Name: THOMPSON, JERRY JR
Address: 13000 NW 47TH AVE.
City-St-Zip: OPA LOCKA, FL 33054

Title: VP () Delete
Name: BRACEFUL, VANDY
Address: 13000 NW 47TH AVE.
City-St-Zip: OPA LOCKA, FL 33054

Title: SEC () Delete
Name: NIBLOCK, LANCE
Address: 13000 NW 47TH AVE.
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LANCE NIBLOCK

SEC

07/05/2007

Electronic Signature of Signing Officer or Director

_____ Date