2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2010
Secretary of State

DOCUMENT# N27351

Entity Name: AMERICAN SUBCONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

1532 SILVER RIDGE DR
CANTONMENT, FL 32533 US

New Principal Place of Business:

Current Mailing Address:

1532 SILVER RIDGE DR
CANTONMENT, FL 32533 US

New Mailing Address:

FEI Number: 59-2911963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STROEHL, JAMIE
1532 SILVER RIDGE DR
CANTONMENT, FL 32533 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
Name: LOCKETT, RICKY
Address: 435 CORDAY STREET
City-St-Zip: PENSACOLA, FL 32503

Title: D
Name: WONDERS, ED
Address: 3127 EAST LANGLEY AVENUE
City-St-Zip: PENSACOLA, FL 32504

Title: D
Name: PURDY, ADAM
Address: 18 STUMPFIELD ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: T
Name: FERGUSON, TOM
Address: 22657 CANAL ROAD
City-St-Zip: ORANGE BEACH, AL 36561

Title: D
Name: CONNELL, MICKEY
Address: 5421 MULAT ROAD
City-St-Zip: MILTON, FL 32583

Title: V
Name: WATTERS, WOODY
Address: 3901 N PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32505

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: JAMIE STROEHL RA 04/18/2010

Electronic Signature of Signing Officer or Director Date