

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 24, 1999 8:00 am
Secretary of State

05-24-1999 90020 042 ****61.25

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DOCUMENT # N97000001263

1. Corporation Name

**COALITION FOR RATIONAL CONSTRUCTION REGULATION,
INC.**

Principal Place of Business

6710 SW 80TH STREET
SUITE 101
MIAMI FL

Mailing Address

6710 SW 80TH STREET
SUITE 101
MIAMI FL



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

3. Date Incorporated or Qualified

03/05/1997

4. FEI Number

65-0768430

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

**GOLDMAN, GARY B
20700 W DIXIE HWY
SUITE 100
NORTH MIAMI BEACH FL 33180**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PD WYNNEMER, MARK**
STREET ADDRESS **5879 SUNSET DR, STE 2**
CITY-ST-ZIP **MIAMI FL 33143-5256**

TITLE ☐ DELETE
NAME **VD COOKE-YARBOROUGH, CHRISTOPHER**
STREET ADDRESS **6802 SW 64TH AVE**
CITY-ST-ZIP **SOUTH MIAMI FL 33143-3234**

TITLE ☐ DELETE
NAME **SD BROWN, BILL**
STREET ADDRESS **9300 SW 68TH AVE**
CITY-ST-ZIP **MIAMI FL 33156-1705**

TITLE ☐ DELETE
NAME **TD DEMANDT, FRANK**
STREET ADDRESS **6710 SW 80TH ST, STE 101**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME **D BROWN, BOB**
STREET ADDRESS **6710 SW 80TH ST, STE 101**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME **D DOWNEY, JACK**
STREET ADDRESS **8715 SW 129TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33176-5903**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED FRANK DEMANDT

Date

305-662-1940

Daytime Phone #

CR2E037 (11/98)