

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711935

**Entity Name:** FLORIDA ASSOCIATION OF PLUMBING-GAS-MECHANICAL INSPECTORS, INC.

**FILED**  
**Jan 31, 2021**  
**Secretary of State**  
**2430539077CC**

**Current Principal Place of Business:**

376 N SAMSULA DRIVE  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

376 N SAMSULA DRIVE  
NEW SMYRNA BEACH, FL 32168 US

**FEI Number: 65-0215426**

**Certificate of Status Desired: No**

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

LEGLER, THOMAS E  
376 N SAMSULA DRIVE  
NEW SMYRNA BEACH, FL 32168 US

*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: THOMAS E LEGLER**

**01/31/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           LEGLER, THOMAS E  
Address        376 N SAMSULA DRIVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title           PAST PRESIDENT  
Name           SALVADOR, ENRIQUE  
Address        700 NW 19TH AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33311

Title           PRESIDENT  
Name           MCSTRAVIC, JACK  
Address        376 N SAMSULA DRIVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title           EXECUTIVE DIRECTOR  
Name           JACKSON, MICHAEL  
Address        5944 RIVER RUN DRIVE  
City-State-Zip: SEBASTIAN FL 32958

Title           SECOND VICE PRESIDENT  
Name           PERDOMO, JOEL  
Address        10395 CHADBURNE DRIVE  
City-State-Zip: TAMPA FL 33624

Title           FIRST VICE PRESIDENT  
Name           LEGLER, THOMAS  
Address        376 N SAMSULA DRIVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title           SECRETARY  
Name           SHOLAR, DARYL  
Address        376 N SAMSULA DRIVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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: THOMAS LEGLER**

**TREASURER**

**01/31/2021**

Electronic Signature of Signing Officer/Director Detail

Date