2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2018
Secretary of State
CC6843859801

DOCUMENT# 719803

Entity Name: SHEETMETAL WORKERS LOCAL UNION NO. 32 APPRENTICESHIP AND TRAINING PROGRAM AND TRAINING FUND, INC.

Current Principal Place of Business:

20401 N.E. 15TH CT.
MIAMI, FL 33179

Current Mailing Address:

20401 N.E. 15TH CT.
MIAMI, FL 33179

FEI Number: 59-1366225

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMBS, JAMES F
20401 NE 15TH COURT.
MIAMI, FL 33179 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: JAMES F. COMBS 02/06/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	VILLARRUEL, DANIEL
Address	20375 NE 15 CT
City-State-Zip:	N MIAMI BCH FL 33179

Title	SECRETARY
Name	MEDLIN, WILLIAM
Address	8986 NW 105 WAY
City-State-Zip:	MEDLEY FL 33178

Title	TRUSTEE
Name	HUDSPETH, ROGER II
Address	1003 BELVEDERE ROAD
City-State-Zip:	WEST PALM BEACH FL 33405

Title	TRUSTEE
Name	PAZOS, RICHARD L
Address	1003 BELVEDER RD
City-State-Zip:	WEST PALM BEACH FL 33405

Title	TRUSTEE
Name	RUDISILL, JOHN
Address	2530 ALI BABA AVE
City-State-Zip:	OPA LOCKA FL 33054

Title	TRUSTEE
Name	RITCHIE, CHRISTOPHER J
Address	20375 NE 15 COURT
City-State-Zip:	MIAMI FL 33179

Title	TRUSTEE
Name	STERLING, TOM
Address	1199 OLD DIXIE HIGHWAY
City-State-Zip:	RIVIERA BEACH FL 33409

Title	TRUSTEE
Name	WOOD, MIKE
Address	1199 OLD DIXIE HIGHWAY
City-State-Zip:	RIVIERA BEACH FL 33409

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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: JAMES F. COMBS TRAINING DIRECTOR 02/06/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	COMBS, JAMES F.
Address	20401 NE 15TH COURT
City-State-Zip:	MIAMI FL 33179