

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768822

Entity Name: SYSTEM COUNCIL U-4, BUILDING CORPORATION**Current Principal Place of Business:**3944 FLORIDA BLVD
STE 202
PALM BCH GARDENS, FL 33410**Current Mailing Address:**3944 FLORIDA BLVD.
STE 202
PALM BEACH GARDENS, FL 33410**FEI Number: 59-2302768****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ALEKNAVICH, GARY J
1062 SE SEAGRASS AVE
PORT SAINT LUCIE, FL 34983 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:** GARY J ALEKNAVICH

03/13/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title RS
Name SAWYER, DOUGLAS E
Address 8945 SW 186 TERRACE
City-State-Zip: CUTLER BAY FL 33157

Title PD
Name RAUCH, SCOTT M
Address 7785 RANCHETTE ROAD
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title TD
Name HAYNICK, TIMOTHY J
Address 745 NORTH CRESENT DRIVE
City-State-Zip: HOLLYWOOD FL 33021

Title VD
Name JENKINS, MATT C
Address 701 NW TREEMONT AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title D
Name RICHARDSON, WESLEY K
Address 7722 US HIGHWAY 441 NORTH
City-State-Zip: LAKE CITY FL 32055

Title D
Name KING, GREGG E.
Address 1907 TEMBERLAKE DRIVE
City-State-Zip: NAPLES FL 34109

Title D
Name WINER, BRIAN L
Address 880 SNOW QUEEN DRIVE
City-State-Zip: CHULUOTA FL 32766

Title D
Name MENIR, MARIO M.
Address 23 SEMINOLE AVENUE
City-State-Zip: PALM COAST FL 32137

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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: GARY J ALEKNAVICH**BUSINESS MANAGER**

03/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name DAVIS, PHIL V. JR.
Address 14729 99TH STREET, N.
City-State-Zip: WEST PALM BEACH FL 33412

Title D
Name SEXTON, MIKE R.
Address 3091 OHIO STREET
City-State-Zip: MELBOURNE FL 32904

Title D.
Name PORTER, ROBERT E
Address 6406 61ST DRIVE EAST
City-State-Zip: PALMETTO FL 34221

Title D
Name SAWYER, DOUGLAS E
Address 8945 SW 186 TERRACE
City-State-Zip: CUTLER BAY FL 33157

Title BM
Name ALEKNAVICH, GARY J
Address 1062 S. E. SEAGRASS AVENUE
City-State-Zip: PORT ST. LUCIE FL 34987