

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002436

Entity Name: BUILDING OFFICIALS ASSOCIATION OF FLORIDA NORTH
FLORIDA CHAPTER, INC.**FILED**
Feb 11, 2015
Secretary of State
CC0023868558**Current Principal Place of Business:**201 SOUTHEAST 3RD STREET
OCALA, FL 34471**Current Mailing Address:**201 SOUTHEAST 3RD STREET
OCALA, FL 34471**FEI Number: 26-3022739****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BAZEMORE, JOHN L
6950 NORTHWEST 210TH STREET
MICANOPY, FL 32667 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT	Title	SECRETARY
Name	FERRONE, GREGORY	Name	NUETZI, MARK A
Address	10 SW 2ND AVE	Address	2710 EAST SILVER SPRINGS BLVD.
City-State-Zip:	GAINESVILLE FL 32601	City-State-Zip:	OCALA FL 34470
Title	DIRECTOR	Title	DIRECTOR
Name	DAVIS, JOE	Name	GAMACHE, FRANK
Address	1105 SW 7TH RD.	Address	1531 NORTHEAST 21ST STREET
City-State-Zip:	OCALA FL 34474	City-State-Zip:	OCALA FL 34470
Title	DIRECTOR	Title	TREASURER
Name	LEVERITT, LARRY	Name	YOUNG, GREGORY
Address	1105 SW 7TH RD.	Address	1105 SW 7TH RD.
City-State-Zip:	OCALA FL 34474	City-State-Zip:	OCALA FL 34474
Title	VP		
Name	GUTIERREZ, MARK		
Address	1105 SW 7TH RD.		
City-State-Zip:	OCALA FL 34474		

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: MARK NUETZI**SECRETARY****02/11/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date