## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002436

Entity Name: BUILDING OFFICIALS ASSOCIATION OF FLORIDA NORTH

FLORIDA CHAPTER, INC.

**Current Principal Place of Business:** 

306 NE 6TH AVENUE BUILDING B GAINESVILLE, FL 32627

**Current Mailing Address:** 

P.O. BOX 1282

CITRA, FL 32113-1282 US

FEI Number: 26-3022739 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YOUNG, GREGORY H 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: GREGORY H. YOUNG 01/29/2024

Electronic Signature of Registered Agent

Date

FILED Jan 29, 2024

Secretary of State

0220190738CC

Officer/Director Detail:

Title PRESIDENT Title VP

Name CARLSON, CHRIS Name BRUNN, ERIC

Address 916 NEWELL DRIVE Address 916 NEWELL DRIVE

PO BOX 112100 PO BOX 112100

City-State-Zip: GAINESVILLE FL 32611-2190 City-State-Zip: GAINESVILLE FL 32611-2190

Title DIRECTOR Title DIRECTOR

NameGUTIERREZ, MARKNameBARRINEAU, HALAddress1105 SW 7TH ROADAddress4405 SE 2ND PLACECity-State-Zip:OCALA FL 34471City-State-Zip:OCALA FL 34471

Title TREASURER Title SECRETARY

Name YOUNG, GREGORY Name STEWART, ARLENE

Address P.O. BOX 1282 Address 9200 NW 39TH AVENUE 130-2

City-State-Zip: CITRA FL 32113 City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name PATRICK, LINDA

Address 916 NEWELL DRIVE PO BOX 112100

City-State-Zip: GAINESVILLE FL 32611-2190

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: GREGORY YOUNG TREASURER 01/29/2024

Electronic Signature of Signing Officer/Director Detail

Date