I hereby certify that the information indicated on this report or supplemental report is true and accurate oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute above, or on an attachment with all other like empowered.		
SIGNATURE [,] KIMBERI Y LANGEDYK	PRESIDENT	03/27/2014

Electronic Signature of Signing Officer/Director Detail

LANGEDYK, RICHARD J 5376 SHADOWLAWN DR.

Name Address City-State-Zip: SARASOTA FL 34242 D

S/D



SARASOTA FL 34242

Officer/Director Detail :

Electronic Signature of Registered Agent

Entity Name: CONSTRUCTION ESTIMATING INSTITUTE OF AMERICA, INC. **Current Principal Place of Business:**

5016 CALLE MINORGA

SARASOTA, FL 34242

Current Mailing Address:

5016 CALLE MINORGA SARASOTA, FL 34242

FEI Number: 59-2738495

Name and Address of Current Registered Agent:

LANGEDYK, KIMBERLY 5376 SHADOWLAWN DR. SARASOTA, FL 34242 US

SIGNATURE:

City-State-Zip:

Title

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DOCUMENT# N17434	

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.

Certificate of Status Desired: No

Title P/D Name LANGEDYK, KIMBERLY Address 5402 SHADOW LAWN DR. City-State-Zip: SARASOTA FL 34242

SIGNATURE: KIMBERLY LANGEDYK PRESIDENT

Date

Date

FILED Mar 27, 2014 Secretary of State CC6968885410