

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000208

**Entity Name:** ASSOCIATED BUILDERS AND CONTRACTORS, FLORIDA'S  
FIRST COAST CHAPTER, INC.**FILED**  
**Jan 25, 2023**  
**Secretary of State**  
**9729518617CC****Current Principal Place of Business:**8130 BAYMEADOWS WAY WEST  
SUITE 309  
JACKSONVILLE, FL 32256**Current Mailing Address:**8130 BAYMEADOWS WAY WEST  
SUITE 309  
JACKSONVILLE, FL 32256 US**FEI Number: 59-3145713****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TRITT, ARNOLD JR  
707 PENINSULAR PLACE  
JACKSONVILLE, FL 32204 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	D
Name	HOFFMAN, KARIN TUCKER
Address	8130 BAYMEADOWS WAY WEST, SUITE 309
City-State-Zip:	JACKSONVILLE FL 32256

Title	C
Name	CHAPMAN, CHRISTOPHER
Address	C/O DANA B. KENYON COMPANY 5772 TIMUQUANA ROAD
City-State-Zip:	JACKSONVILLE FL 32210

Title	T
Name	OUIMET, TRAVIS
Address	5150 BELFORT RD. #600
City-State-Zip:	JACKSONVILLE FL 32256

Title	VC
Name	SPRADLIN, EVENDER
Address	C/O BATSON COOK COMPANY 8860 PHILIPS HIGHWAY
City-State-Zip:	JACKSONVILLE FL 32256

*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: KARIN TUCKER HOFFMAN****DIRECTOR****01/25/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date