

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000143609

**Entity Name:** FLORIDA CARPENTERS REGIONAL COUNCIL, LLC**Current Principal Place of Business:**2860 NW 27TH AVE  
FORT LAUDERDALE , FL 33311**Current Mailing Address:**2860 NW 27TH AVE  
FORT LAUDERDALE , FL 33311 US**FEI Number:** 20-1854375**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHARON , CARLSON CPA  
C/O LAPADULA, CARLSON + CO  
550 BILTMORE WAY 1200  
CORAL GABLES, FL 33134 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:** SHARON CARLSON

02/25/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            CAMPBELL, CLARENCE  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            TREASURER  
Name            BANKS, JAMES JR  
Address        2860 NW 27 AVENUE  
City-State-Zip: OAKLAND PARK FL 33311

Title            VP  
Name            ROGERS, RONNIE  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            AUTHORIZED MEMBER  
Name            BAUER, MARTIN  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            TRUSTEE  
Name            PAGE, RANDY  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            WARDEN  
Name            LOVE, BILLY JR.  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            TRUSTEE  
Name            SWANSON, MATTHEW  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            TRUSTEE  
Name            D' ANGELO, FRANK  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES BANKS

TREASURER

02/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title            AUTHORIZED MEMBER  
Name            HERNANDEZ, HUMBERTO  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311

Title            CONDUCTOR  
Name            MORRISON, CHRISTOPHER  
Address        2860 NW 27TH AVE  
City-State-Zip: OAKLAND PARK FL 33311