FORT LAUE	DERDALE, FL 3	3311		
Current M	lailing Addre	ess:		
	27TH AVE UDERDALE ,	FL 33311 US		
FEI Num	per: 20-18543	75		Cert
Name and	d Address of	Current Registered	Agent:	
C/O LAPAD 550 BILTMC	CARLSON CPA ULA, CARLSON DRE WAY 1200 BLES, FL 33134	+ CO		
The above na	med entity submits	this statement for the purpose of	of changing its registered office or i	registered ag
SIGNATU	RE: SHARO	N CARLSON		
	Electronic	Signature of Registered Ag	jent	
Authorize	ed Person(s)	Detail :		
Title	PRESIDEN	Т	Title	TRE
Name	D'ANGELO,	FRANK	Name	BANI
Address	2860 NW 27	7TH AVE	Address	2860

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000143609

Entity Name: FLORIDA CARPENTERS REGIONAL COUNCIL, LLC

Current Principal Place of Business:

2860 NW 27TH AVE

FILED Apr 08, 2025 **Secretary of State** 2819301225CC

tificate of Status Desired: No

agent, or both, in the State of Florida.

SIGNATURE:	SHARON CARLSON			04/08/2025
	Electronic Signature of Registered Agent			Date
Authorized P	Person(s) Detail :			
Title	PRESIDENT	Title	TREASURER	
Name	D'ANGELO, FRANK	Name	BANKS, JAMES JR	
Address	2860 NW 27TH AVE	Address	2860 NW 27 AVENUE	
City-State-Zip:	FORT LAUDERDALE FL 33311	City-State-Zip:	OAKLAND PARK FL 33311	
Title	VP	Title	EXECUTIVE COMMITTEE	
Name	ROGERS, RONNIE	Name	WEITZEL, JASON	
Address	2860 NW 27TH AVE	Address	2860 NW 27TH AVE	
City-State-Zip:	OAKLAND PARK FL 33311	City-State-Zip:	FORT LAUDERDALE FL 3331	1
Title	TRUSTEE	Title	WARDEN	
Name	PAGE, RANDY	Name	WASHINGTON, ROBERT	
Address	2860 NW 27TH AVE	Address	2860 NW 27TH AVE	
City-State-Zip:	OAKLAND PARK FL 33311	City-State-Zip:	OAKLAND PARK FL 33311	
Title	TRUSTEE	Title	TRUSTEE	
Name	SWANSON, MATTHEW	Name	MICHAEL, HARPER	
Address	2860 NW 27TH AVE	Address	2860 NW 27TH AVE	
City-State-Zip:	OAKLAND PARK FL 33311	City-State-Zip:	OAKLAND PARK FL 33311	

Continues on page 2

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

04/08/2025 EXECUTIVE SECRETARY/TREASURER

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail Continued :

Title	EXE COMMITTEE	Title	CONDUCTOR
Name	JIRON, ALEXANDER	Name	STEVENS, JOSEPH
Address	2860 NW 27TH AVE	Address	2860 NW 27TH AVE
City-State-Zip:	FORT LAUDERDALE FL 33311	City-State-Zip:	FORT LAUDERDALE FL 33311