

Form **990**

OMB No 1545-0047

# Return of Organization Exempt From Income Tax

**2004**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2004 calendar year, or tax year beginning 7/01/04, and ending 6/30/05

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>FLORIDA SMACNA, INC.</b>		<b>D</b> Employer identification no. <b>59-2949075</b>
		Number and street (or P O box if mail is not delivered to street address) Room/suite <b>6767 NORTH WICKHAM ROAD 400</b>		<b>E</b> Telephone number <b>321-242-8223</b>
		City or town, state or country, and ZIP + 4 <b>MELBOURNE FL 32940-2025</b>		<b>F</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Website: N/A

**J** Organization type (check only one)  501(c) ( 6 ) < (insert no.)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 192,131

H and I are not applicable to section 527 organizations

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates     

**H(c)** Are all affiliates included?  Yes  No (If "No," att a list See Instr)

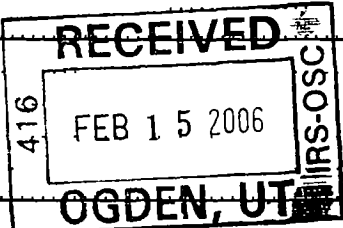
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number     

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

<b>1</b> Contributions, gifts, grants, and similar amounts received:			
<b>a</b> Direct public support	<b>1a</b>		
<b>b</b> Indirect public support	<b>1b</b>		
<b>c</b> Government contributions (grants)	<b>1c</b>		
<b>d</b> Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____ )	<b>1d</b>		<b>0</b>
<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		
<b>3</b> Membership dues and assessments	<b>3</b>		<b>176,621</b>
<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		<b>9,099</b>
<b>5</b> Dividends and interest from securities	<b>5</b>		<b>2,377</b>
<b>6a</b> Gross rents	<b>6a</b>		
<b>b</b> Less: rental expenses	<b>6b</b>		
<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		
<b>7</b> Other investment income (describe <u>    </u> )	<b>7</b>		
<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>	<b>8b</b>	
<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>		
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>		
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>		
<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>		
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>		
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		
<b>b</b> Less: cost of goods sold	<b>10b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>		<b>4,034</b>
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		<b>192,131</b>
<b>13</b> Program services (from line 44, column (B))	<b>13</b>		
<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		
<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		
<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		<b>3,934</b>
<b>17</b> Total expenses (add lines 16 and 44, column (A))	<b>17</b>		<b>173,588</b>
<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		<b>18,543</b>
<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>397,001</b>
<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		<b>183,807</b>
<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		<b>599,351</b>



See Statement 1

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**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____ )	22			
23	Specific assistance to individuals	23			
24	Benefits paid to or for members	24			
25	Compensation of officers, directors, etc.	25			
26	Other salaries and wages	26	78,776		
27	Pension plan contributions	27	841		
28	Other employee benefits	28			
29	Payroll taxes	29	6,525		
30	Professional fundraising fees	30			
31	Accounting fees	31	2,435		
32	Legal fees	32	2,762		
33	Supplies	33	2,144		
34	Telephone	34	5,129		
35	Postage and shipping	35			
36	Occupancy	36	10,959		
37	Equipment rental and maintenance	37			
38	Printing and publications	38	15,183		
39	Travel	39	4,030		
40	Conferences, conventions, and meetings	40	21,298		
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	2,258		
43	Other expenses not covered above (itemize): a	43a			
	b See Statement 2	43b	17,314		
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	169,654	0	0

Joint Costs. Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)**

What is the organization's primary exempt purpose? ► <b>BUSINESS ASSOCIATION</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) & (4) orgs., & 4947(a)(1) trusts, but optional for others.)
a See Statement 3	
(Grants and allocations \$ _____ )	169,654
b	
(Grants and allocations \$ _____ )	
c	
(Grants and allocations \$ _____ )	
d	
(Grants and allocations \$ _____ )	
e Other program services (attach schedule)	(Grants and allocations \$ _____ )
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	169,654

**Part IV Balance Sheets (See page 25 of the instructions.)**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.		(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing	32,985	45	49,809
46	Savings and temporary cash investments	341,445	46	529,257
47a	Accounts receivable			
b	Less: allowance for doubtful accounts		47c	
48a	Pledges receivable			
b	Less allowance for doubtful accounts		48c	
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges		53	
54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
55a	Investments-land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach schedule)		55c	
56	Investments-other (attach schedule)		56	
57a	Land, buildings, and equipment: basis	37,212		
b	Less: accumulated depreciation (attach schedule)	17,700	57c	19,512
58	Other assets (describe <b>See Statement 4</b> )	800	58	800
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	397,001	59	599,378
60	Accounts payable and accrued expenses		60	27
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe )		65	
66	<b>Total liabilities</b> (add lines 60 through 65)	0	66	27
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>				
67	Unrestricted	397,001	67	599,351
68	Temporarily restricted		68	
69	Permanently restricted		69	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>				
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	397,001	73	599,351
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	397,001	74	599,378

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

<p><b>Part IV-A</b> Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)</p> <p><b>N/A</b></p> <p><b>a</b> Total revenue, gains, and other support per audited financial statements ▶ <b>a</b></p> <p><b>b</b> Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments \$ _____</p> <p>(2) Donated services and use of facilities \$ _____</p> <p>(3) Recoveries of prior year grants \$ _____</p> <p>(4) Other (specify): _____</p> <p>\$ _____</p> <p>Add amounts on lines (1) through (4) ▶ <b>b</b></p> <p><b>c</b> Line a minus line b ▶ <b>c</b></p> <p><b>d</b> Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): _____</p> <p>\$ _____</p> <p>Add amounts on lines (1) and (2) ▶ <b>d</b></p> <p><b>e</b> Total revenue per line 12, Form 990 (line c plus line d) ▶ <b>e</b></p>	<p><b>Part IV-B</b> Reconciliation of Expenses per Audited Financial Statements with Expenses per Return</p> <p><b>N/A</b></p> <p><b>a</b> Total expenses and losses per audited financial statements ▶ <b>a</b></p> <p><b>b</b> Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ _____</p> <p>(3) Losses reported on line 20, Form 990 \$ _____</p> <p>(4) Other (specify): _____</p> <p>\$ _____</p> <p>Add amounts on lines (1) through (4) ▶ <b>b</b></p> <p><b>c</b> Line a minus line b ▶ <b>c</b></p> <p><b>d</b> Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): _____</p> <p>\$ _____</p> <p>Add amounts on lines (1) and (2) ▶ <b>d</b></p> <p><b>e</b> Total expenses per line 17, Form 990 (line c plus line d) ▶ <b>e</b></p>
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**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see page 27 of the instructions )

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<b>RONALD LAPIN</b> <b>3825 GARDENIA AVE ORLANDO FL 32834</b>	<b>PRESIDENT</b>	0	0	0
<b>RALPH CARVER</b> <b>2730 EUNICE AVENUE ORLANDO FL 32808</b>	<b>VICE PRES</b>	0	0	0
<b>JAMES LEE</b> <b>P.O. BOX 756 EAST PALAT FL 32131</b>	<b>SEC/TREASURER</b>	0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶  Yes  No  
 If "Yes," attach schedule-see page 28 of the instructions.

**Part VI Other Information (See page 28 of the instructions.)**

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X	
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.	81a		
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a		
b	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? if "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	X	
c	Dues, assessments, and similar amounts from members	85c		
d	Section 162(e) lobbying and political expenditures	85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a		
b	Gross receipts, included on line 12, for public use of club facilities	86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> ; section 4912 <input type="checkbox"/> ; section 4955 <input type="checkbox"/>			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			
90a	List the states with which a copy of this return is filed <input type="checkbox"/> FL			
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b		1
91	The books are in care of <input type="checkbox"/> SUSAN KARR Located at <input type="checkbox"/> 6767 N WICKHAM RD, MELBOURNE, FL		Telephone no. <input type="checkbox"/> 321-242-8223 ZIP + 4 <input type="checkbox"/> 32940-2025	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/>	92		

**Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)**

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					176,621
95 Interest on savings and temporary cash investments			14	9,099	
96 Dividends and interest from securities			14	2,377	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b <b>MANUAL SALES</b>					422
c <b>MISCELLANEOUS</b>					2,107
d <b>SEMINARS &amp; CONFERENCES</b>					1,505
e					
104 Subtotal (add columns (B), (D), and (E))		0		11,476	180,655
105 Total (add line 104, columns (B), (D), and (E))					192,131

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)**

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 5

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Please Sign Here**

Signature of officer: RONALD LARIN      Date: 2.10.06  
 Type or print name and title: PRESIDENT

**Paid Preparer's Use Only**

Preparer's signature: Richard A. Paul, CPA      Date: 1/31/06      Check if self-employed:       Preparer's SSN or PTIN (See Gen Instr W): 267-60-6607

Firm's name (or yours if self-employed), address, and ZIP + 4: RICHARD A. PAUL, P.A. 429 EAST MAGNOLIA AVENUE EUSTIS, FL 32726-3551      EIN: 59-2944761      Phone no: 352-357-3141

Florida SMACNA, Inc.  
6767 North Wickham Road, Suite 400  
Melbourne, FL 32940

59-2949075  
Form 990  
06/30/05

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Page 1, Part I, Line 16 – Payments to affiliates:

SMACNA  
Sheet Metal and Air Conditioning Contractors' National Association  
4201 Lafayette Center Drive  
Chantilly, VA 20151

\$3,934.00

SMACNA is a federation of local sheet metal contractor association, which are chartered as chapters. National SMACNA functions as a service organization providing a wide range of services, materials, information, and support covering association administration, programming, education, technical, labor relations, governmental affairs, industry safety and health, and business insurance.

**Federal Statements****Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances**

<u>Description</u>	<u>Amount</u>
JACKSONVILLE SHEET METAL INDUSTRY FUND MERGER	\$ 176,440
SOUTH FLORIDA SMACNA MERGER	7,367
Total	<u>\$ 183,807</u>



**Federal Statements****Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
LABOR NEGOTIATIONS	14			
AUTO EXPENSES	1,591			
CONTRACT LABOR	6,128			
INSURANCE	6,382			
TRAINING AND SEMINARS	1,125			
MISCELLANEOUS	2,074			
Total	<u>\$ 17,314</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

**Statement 3 - Form 990, Part III, Line a - Statement of Program Service Accomplishments**

SHEET METAL INDUSTRY ADVANCEMENT, RELATIONS, REPRESENTATION, EDUCATION, TRAINING SEMINARS, AND STUDIES. ALL IS DONE FOR THE BENEFIT OF THE SHEET METAL INDUSTRY AND ITS MEMBERS. TWENTY-TWO MEMBER COMPANIES ARE ASSOCIATED WITH THIS ENTITY.

# Federal Statements

## Statement 4 - Form 990, Part IV, Line 58 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
DEPOSITS	\$ 800	\$ 800
Total	\$ 800	\$ 800

# Federal Statements

## Statement 5 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	<u>Description</u>
94	ACTIVITIES ALLOWED THE ASSOCIATION TO WORK TOWARDS INDUSTRY
103b	ADVANCEMENT THROUGH DISTRIBUTION OF INFORMATION,
103c	ESTABLISHMENT OF RELATIONS WITH RELATED ORGANIZATIONS,
103d	INDUSTRY REPRESENTATION, AND STUDIES. ALL ACTIVITIES
	COMPRISE THE EXEMPT PURPOSE.

# Depreciation and Amortization

OMB No 1545-0172

Form **4562**

(Including Information on Listed Property)

**2004**

Department of the Treasury  
Internal Revenue Service

▶ See separate instructions.

▶ Attach to your tax return.

Attachment  
Sequence No **67**

Name(s) shown on return

**FLORIDA SMACNA, INC.**

Identifying number

**59-2949075**

Business or activity to which this form relates

**Indirect Depreciation**

**Part I Election To Expense Certain Property Under Section 179**

**Note: If you have any listed property, complete Part V before you complete Part I.**

1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses	1	102,000
2 Total cost of section 179 property placed in service (see page 3 of the instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	410,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 3 of the instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2003 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14 Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg 3 of the instructions)	14	
15 Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	218

**Part III MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions.)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2004	17	265
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

**Section B-Assets Placed in Service During 2004 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs	MM	S/L	

**Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (see page 8 of the instructions)**

21 Listed property. Enter amount from line 28	21	1,775
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr.	22	2,258
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2004)

**Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

**Section A-Depreciation and Other Information (Caution: See page 9 of the instructions for limits for passenger automobiles.)**

24a Do you have evidence to support the business/investment use claimed?  Yes  No 24b If "Yes," is the evidence written?  Yes  No

(a) Type of prop (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
---	----------------------------------	---	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 8 of the instructions) 25

26 Property used more than 50% in a qualified business use (see page 8 of the instructions):

2002 LINCOLN LS	5/20/02	100.00%	33,192	25,532	5.0	200DBHY	1,775	
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27 Property used 50% or less in a qualified business use (see page 8 of the instructions):

		%				S/L-		
		%				S/L-		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 1,775

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

**Section B-Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a)		(b)		(c)		(d)		(e)		(f)	
	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4	Vehicle 5	Vehicle 6	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4	Vehicle 5	Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles-See page 2 of the instructions)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 10 of the instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 10 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 10 of the instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	------------------------------	------------------------	--	--------------------------------------

42 Amortization of costs that begins during your 2004 tax year (see page 11 of the instructions):

--	--	--	--	--	--

43 Amortization of costs that began before your 2004 tax year 43 0

44 Total. Add amounts in column (f). See page 12 of the instructions for where to report 44

**Federal Asset Report**  
**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
<b>Prior MACRS:</b>										
7	FILE & BOOKCASE	7/02/01	200				200	7 HY 200DB	123	22
8	SHELVING	8/28/01	215				215	7 HY 200DB	133	23
10	FOLDING TABLE-USED	4/09/03	109				109	7 HY 200DB	57	15
11	(4) 5 DRAWER LETTER FILES-USED	4/09/03	301				301	7 HY 200DB	156	41
12	STORAGE CABINET-USED	4/09/03	143			X	100	7 HY 200DB	74	20
13	COMPUTER	9/23/03	899			X	450	5 HY 200DB	539	144
			<u>1,867</u>				<u>1,375</u>		<u>1,082</u>	<u>265</u>
<b>Other Depreciation:</b>										
1	FURNITURE	6/16/98	600				600	7 MO S/L	536	64
3	FURNITURE	8/19/98	761				761	7 MO S/L	634	109
4	CHAIR	8/21/98	316				316	7 MO S/L	263	45
5	FAX MACHINE	9/25/98	476				476	5 MO S/L	476	0
	<b>Total Other Depreciation</b>		<u>2,153</u>				<u>2,153</u>		<u>1,909</u>	<u>218</u>
	<b>Total ACRS and Other Depreciation</b>		<u>2,153</u>				<u>2,153</u>		<u>1,909</u>	<u>218</u>
<b>Listed Property:</b>										
9	2002 LINCOLN LS	5/20/02	33,192	A		X	25,532	5 HY 200DB	12,450	1,775
			<u>33,192</u>				<u>25,532</u>		<u>12,450</u>	<u>1,775</u>
	<b>Grand Totals</b>		37,212				29,060		15,441	2,258
	<b>Less: Dispositions</b>		0				0		0	0
	<b>Net Grand Totals</b>		<u>37,212</u>				<u>29,060</u>		<u>15,441</u>	<u>2,258</u>

59-2949075

**AMT Asset Report**

FYE: 6/30/2005

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec 168(k)	Basis for Depr	PerConv Meth	Prior	Current
<b>Prior MACRS:</b>										
7	FILE & BOOKCASE	7/02/01	200				200	7 HY 150DB	90	24
8	SHELVING	8/28/01	215				215	7 HY 150DB	96	27
10	FOLDING TABLE-USED	4/09/03	109				109	7 HY 150DB	33	16
11	(4) 5 DRAWER LETTER FILES-USED	4/09/03	301				301	7 HY 150DB	90	45
12	STORAGE CABINET-USED	4/09/03	143		X		100	7 HY 200DB	82	17
13	COMPUTER	9/23/03	899		X		450	5 HY 200DB	539	144
			<u>1,867</u>				<u>1,375</u>		<u>930</u>	<u>273</u>
<b>Other Depreciation:</b>										
1	FURNITURE	6/16/98	0				0	0 HY	0	0
3	FURNITURE	8/19/98	0				0	0 HY	0	0
4	CHAIR	8/21/98	0				0	0 HY	0	0
5	FAX MACHINE	9/25/98	0				0	0 HY	0	0
	<b>Total Other Depreciation</b>		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
<b>Listed Property:</b>										
9	2002 LINCOLN LS	5/20/02	33,192	A		X	25,532	5 HY 200DB	24,989	1,775
			<u>33,192</u>				<u>25,532</u>		<u>24,989</u>	<u>1,775</u>
	<b>Grand Totals</b>		35,059				26,907		25,919	2,048
	<b>Less: Dispositions</b>		0				0		0	0
	<b>Net Grand Totals</b>		<u>35,059</u>				<u>26,907</u>		<u>25,919</u>	<u>2,048</u>

**Depreciation Adjustment Report****All Business Activities**

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<b>MACRS Adjustments:</b>						
Page 1	1	7	FILE & BOOKCASE	22	24	-2
Page 1	1	8	SHELVING	23	27	-4
Page 1	1	9	2002 LINCOLN LS	1,775	1,775	0
Page 1	1	10	FOLDING TABLE-USED	15	16	-1
Page 1	1	11	(4) 5 DRAWER LETTER FILES-USED	41	45	-4
Page 1	1	12	STORAGE CABINET-USED	20	17	3
Page 1	1	13	COMPUTER	144	144	0
				<u>2,040</u>	<u>2,048</u>	<u>-8</u>



59-2949075

## Sec 168(k) Report

FYE: 6/30/2005

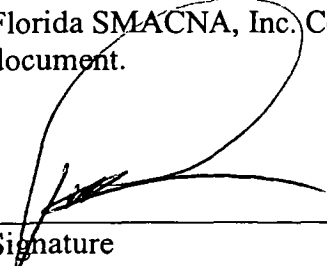
Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Sec 168(k)	Prior Sec 168(k)	Tax - Basis for Depr
<b>Activity: Form 990, Page 1</b>								
9	2002 LINCOLN LS	5/20/02	33,192	100	0	0	7,660	25,532
12	STORAGE CABINET-USED	4/09/03	143		0	0	43	100
13	COMPUTER	9/23/03	899		0	0	449	450
	<b>Form 990, Page 1</b>		<u>34,234</u>		<u>0</u>	<u>0</u>	<u>8,152</u>	<u>26,082</u>
	<b>Grand Total</b>		<u>34,234</u>		<u>0</u>	<u>0</u>	<u>8,152</u>	<u>26,082</u>

Florida SMACNA, Inc.  
6767 North Wickham Road, Suite 400  
Melbourne, FL 32940

59-2949075  
Form 990  
06/30/05

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As an officer of Florida SMACNA, Inc., I hereby certify that the attached copy of the Florida SMACNA, Inc. Constitution is a complete and accurate copy of the original document.

  
\_\_\_\_\_  
Signature

PRESIDENT  
\_\_\_\_\_  
Title

July 22, 2005  
\_\_\_\_\_  
Date

# FLORIDA SMACNA, INC.

## CONSTITUTION

### ARTICLE I

#### NAME

The name of this association, incorporated under the laws of the State of Florida, is FLORIDA SMACNA (SHEET METAL AND AIR CONDITIONING CONTRACTORS' ASSOCIATION, INC.)

### ARTICLE II

#### OFFICE

The office of Florida SMACNA, Inc. shall be located in Florida at such place as the Board of Directors shall determine from time to time.

### ARTICLE III

#### PURPOSES

Section 1. Industry Advancement. The advancement of the sheet metal industry through securing the cooperation of the various persons and firms engaged in such businesses, and collecting, correlating, and disseminating information of value.

Section 2. Industry Relations. To establish and maintain high standards of workmanship, and to establish harmonious and proper relations with the members of related organizations.

Section 3. Standards. To promote, through cooperative effort and published facts, industry standards to the general public.

Section 4. Industry Representation. To provide representation on behalf of the industry with government, industry groups, labor and the public.

Section 5. Industry Studies. To initiate, promote and document studies directed toward the solution of present and future problems incident to the industry.

## ARTICLE IV

### MEMBERSHIP

Section 1. Membership Classifications. Membership in this Association shall be composed of two classes of membership as follows:

- (1) Regular Membership
- (2) Associate Membership

In addition, the Board of Directors may establish by provision of the By-Laws, additional affiliated membership in the Association. Provided, however, that such affiliated classifications shall have purposes which are consistent with the purposes of the Association. Affiliates established by the Bylaws shall have no property rights or voting rights, and shall not be eligibles for office in this Association.

Section 2. Membership Definitions.

**Regular Membership.** Any contracting firm of good repute, engaged in a business, which has been established for at least one year as a Sheet Metal, Heating, Ventilating and Air Conditioning Contractor, Balancing Contractor, Specialty Sheet Metal Contractor, or Architectural Sheet Metal Contractor and located within the geographic jurisdiction of the Association, and which is in contractual relations with Local Union # 435, Local Union #15 and Local Union #32 of the Sheet Metal Workers International Association, shall be eligible for Regular Membership under the terms and conditions specified in Article IV, Section 3.

**Associate Membership.** Any person, firm , or corporation engaged in selling products and/or services to the contractor membership of this Association. Such membership is offered to those persons, firms, or corporations who are interested in furthering the objectives and goals of the industry.

Section 3. Application Procedures for Membership.

**Regular Membership**

- (1) Applicants shall make application for membership on the application form provided for that purpose.
- (2) Applications shall be submitted to the Board of Directors. The Board shall vote on acceptance or denial of the application by mail referendum or in session.
- (3) The dues and fees to be paid and method of payment by the Regular Member shall be established by the Board of Directors .

### Associate Membership

Due to the diversity of potential Associate Members the Board of Directors is authorized to establish more than one classification and a fee schedule for each classification and shall include such provisions in the Bylaws of this Association.

Section 4. Suspensions/Expulsion. Any member who becomes delinquent in its financial obligations to the Association or engages in conduct which is against the best interests or declared purposes of the Association may be expelled or suspended at the discretion of the Board of Directors.

When suspension or expulsion of a member for reasons other than financial delinquency is to be considered by the Board of Directors, the member shall be furnished with the allegations in writing by registered mail at least thirty (30) calendar days prior to the Board meeting at which such consideration is scheduled.

The member shall be afforded the opportunity to appear before the Board to present evidence and/or testify in opposition to the proposed suspension or expulsion and may have legal counsel to assist in the presentation.

## ARTICLE V

### MANAGEMENT

Section 1. Board of Directors. The Board of Directors shall consist of three (3) members who are elected by the Regular Membership. The composition of the Board shall reflect the geographical area covered by the Association. The Association President, Vice President, Secretary-Treasurer, shall also be voting Directors.

The management of this Association shall be vested in the Board of Directors. The Board of Directors shall have the authority to make and alter Bylaws of the Association subject only to the right of the Regular Members of the Association at any membership meeting to change or repeal such Bylaws. The Board of Directors shall have authority to designate and executive committee to act on behalf of the Board between meetings of the Board of Directors.

Section 2. Board of Directors - Removal of Officers and Directors. The Board of Directors, by a majority vote, shall have the power to remove any officer or director for failure to perform properly the duties of the office, provided said officer or director shall have first been afforded an opportunity for a fair and impartial hearing by the Board of Directors at regular or specially called meeting.

With the exception of the professional chief executive officer of the Association (if any), an officer or director shall be automatically removed from the office on the date on which the

individual is no longer a partner, proprietor or a corporate officer of a Regular Member firm of the Association.

Section 3. Board of Directors - Unexpired Term Appointment. In the event any officer or director position becomes vacant, by reason of death, resignation, or otherwise, the Board of Directors shall have the authority to fill said office until the next regular election.

## ARTICLE VI

### ANNUAL BUSINESS MEETING

Section 1. Place and Date of Annual Business Meeting. The annual Business Meeting of the members of this Association shall be held at a time and place to be selected by the Board of Directors.

Section 2. Special Business Meeting. Special Business Meetings of this Association may be called by the President with the approval of a majority of the Board of Directors.

Section 3. Business Meeting Quorum. A quorum for the transaction of business at any Annual or Special Business Meeting shall be those duly authorized delegated present at the meeting.

Section 4. Delegates. Each Regular and associate Member may select as a delegate to attend and participate on its behalf in the functions of the Association any partner, corporate officer, or management person regularly in the employ of the member firm.

Section 5. Voting - Tie Vote. Each Regular Member firm in good standing with the Association shall be eligible to cast one ballot vote on all questions brought before any business meeting of this Association.

In voting on all matters which shall be brought before any Association business meeting, a simple majority of votes cast shall prevail. In case of a tie vote, the presiding officer shall cast the deciding vote.

Associate Members shall have no voting rights on Association business matters.

## ARTICLE VII

### ELECTION OF DIRECTORS

Section 1. General Provisions. At each Annual Business Meeting of this Association, one Director shall be elected from the Regular Members to serve for a term of three (3) years. At each Annual Business Meeting, Directors shall be elected to serve the unexpired terms created by death, resignation or other cause.

Section 2. Nominations

The Regular Membership is to be notified, not less than 30 days prior to the Annual Business Meeting, of Director vacancies to be filled and that the Nominating Committee will receive names and qualifications of the proposed candidates.

Section 3 Taking Office. The newly elected Directors shall take office following adjournment of the Annual Business Meeting.

ARTICLE VIII

OFFICERS

Section 1. Officers Vote. At each Annual Business Meeting of this Association, officers will be selected. The officers of this Association shall be a President, Vice-President, Secretary-Treasurer, and professional chief executive officer (if any). Each shall have a vote on matters of business, except the professional chief executive officer (if any).

The President, Vice-President, and Secretary-Treasurer shall be elected by the Board of Directors from partners, proprietors, or corporate officers of Regular Members at the Annual Business Meeting of this Association. Officer terms shall begin on the day following adjournment of the Annual Business Meeting.

The Board of Directors shall establish its own rule as to the method of conducting nominations and election of officers.

ARTICLE IX

AMENDMENTS

Section 1. Amendment Procedure. Amendments may be proposed by any Regular Member. Amendments proposed must be in writing to the Board of Directors not later than 60 days prior to the Annual Business Meeting. The Board of Directors shall either approve the amendments for a vote at the next Annual Business Meeting or reject the amendments and notify the proponents thereof of the rejection.

Amendments rejected by the Board of Directors may be placed before the Annual Business Meeting without previous written announcement, providing that a total of three Regular Members subscribe to the amendment.

Section 2. Announcement to Regular Membership. A verbatim copy of a proposed amendment shall be mailed to each Regular Member of the Association at least, 30 days prior to the next Annual Business Meeting following the approval by the Board of Directors. Notice shall be deemed to have been given as of the date of mailing.

Form **8868**  
(Rev. December 2004)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

## Part I Automatic 3-Month Extension of Time- Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension-check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns

Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile)

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization <b>FLORIDA SMACNA, INC.</b>	Employer identification number <b>59-2949075</b>
	Number, street, and room or suite no. If a P O box, see instructions. <b>6767 NORTH WICKHAM ROAD 400</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MELBOURNE FL 32940-2025</b>	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

● The books are in the care of ▶ **SUSAN KARR**

Telephone No ▶ **321-242-8223** FAX No. ▶ **321-242-8277**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **2/15/06** , to file the exempt organization return for the organization named above The extension is for the organization's return for:

▶  calendar year or

▶  tax year beginning **7/01/04** , and ending **6/30/05** .

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_

c **Balance Due.** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 12-2004)