

PRE-PROPOSAL MEETING ATTENDANCE ROSTER

LOCATION: Turnpike Headquarters Building

DATE: September 17, 2015

Florida's Turnpike, Milepost 263.0, Bldg. 5315

Contract Number E8P46

Ocoee, Florida 34761

PROJECT: Asset Maintenance - Zone #4 Citrus, Hernando, Hillsborough, Pasco, Polk Counties

Your Name: John M. Jorgensen

Employer: JORGENSEN CONTRACT SERVICES

Address: 1645 E. Hwy 50

Phone: 352-432-~~33~~³⁹⁴⁹

Cell: 850-258-3601

Fax: _____

City: CLERMONT State: FL Zip: 34711

Email Address: John.M.Jorgensen@royjorgensen.com

Your Name: Mitch Stamitales

Employer: I IPL

Address: mitch

Phone: _____

Cell: 904-402-2538

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: mitch-stamitales@italindia.com

Your Name: Judy Hilliard

Employer: FDOT

Address: Turkey 1K SWS PIZ

Phone: 407-264-3014

Cell: _____

Fax: _____

City: Ocoee State: FL Zip: 34761

Email Address: Jell judy.hilliard@dot.state.fl.us

Your Name: MARIA COUDOUY

Employer: FDOT

Address: POMPANO OPERATIONS

Phone: 954 934-1209

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: Santiago Alvarez

Employer: FDOT

Address: Pompano Facilities (via tele-conf)

Phone: 954-934-1261

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

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Your Name: MATT EARENZELE

Employer: TME ENT INC.

Phone: 757-466-8717

Address: 4039 BVELL ST.
CHES. VA. 23324

Cell: _____

Fax: 757-459-2191

City: CHESAPEAKE State: VA Zip: 23324

Email Address: MATTE@TMEENTERPRISES.COM

Your Name: ADEMOLA ADELEKAN

Employer: FDOT TPK

Phone: 9549341224

Address: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: DAVID TUKI

Employer: TURNPIKE / JACOBS

Phone: 813-376-3120

Address: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: Chad Williams

Employer: FDOT - D3

Phone: _____

Address: _____ (via: tele conf.)

Cell: _____

Fax: _____

City: Chipley State: FL Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Phone: _____

Address: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

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Your Name: CHRIS WARREN

Employer: HDR/ICA

Address: 915 18th St.

Phone: /

Cell: 540-416-6716

Fax:

City: Orlando State: FL Zip: 32805

Email Address: Chris.Warren@hdrinc.com

Your Name: JOSEPH GADAH

Employer: HDR/ICA

Address: 1907 NORTH US HWY 301, STE. 160-C

Phone:

Cell: 813-267-2518

Fax:

City: TAMPA State: FL Zip: 33619

Email Address: joey.gadah@hdrinc.com

Your Name: Todd Hammerle

Employer: DBI Services

Address: 100 N. Colahan Dr. Hazleton PA 18201

Phone:

Cell: 386 878 3949

Fax:

City: Hazleton State: PA Zip: 18201

Email Address: todd.hammerle@dbiservices.com

Your Name: HOSSEIN BAREKAT

Employer: FDOT-TURNPIKE

Address: P.O. Box 12639 FT. Pierce, FL 34979-2639

Phone:

Cell:

Fax:

City: State: Zip:

Email Address: Hossein.Barekat@dot.state.fl.us

Your Name:

Employer:

Address:

Phone:

Cell:

Fax:

City: State: Zip:

Email Address:

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Your Name: PATRICK OWEN

Employer: TME ENTERPRISES, INC.

Address: 4039 BOELL ST
CHESAPEAKE VA

Phone: 757 466 8717

Cell: _____

Fax: 757 459 2192

City: CHESAPEAKE State: VA Zip: 23324

Email Address: PATRICK @ TMEENTERPRISES.COM

Your Name: Brian Bonfanti

Employer: Southern Lights Electrical Contractors, Inc.

Address: 1815 30th Ave. E.

Phone: 941-526-8831

Cell: 941-526-8851

Fax: 941-643-4800

City: Bradenton State: FL Zip: 34234

Email Address: southernlightselectric@gmail.com

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

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Your Name: DAVE JACKSON

Employer: TME

Address: 18 W. Jersey ST. Orlando 32806

City: Orlando State: FL Zip: 32806

Email Address: DAVID.JACKSON@TMEEnterprisus.com

Phone: 407-230-2026

Cell: 407-883-2445

Fax: _____

Your Name: Gerald L Lansaw

Employer: HDR-ICA

Address: 1907 N. US Hwy 301, Suite 160-C
TAMPA, FL 33619

City: _____ State: _____ Zip: _____

Email Address: glansaw@ica-onramp.com

Phone: 813-413-4514

Cell: 813-267-6721

Fax: 813-436-8914

Your Name: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____

Cell: _____

Fax: _____

Your Name: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____

Cell: _____

Fax: _____

Your Name: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____

Cell: _____

Fax: _____

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Your Name: Shawn Doherty

Employer: Louis Berger / Hawthorne

Address: 6545 Fain Blvd.

Phone: 843-797-8484

Cell: _____

Fax: _____

City: Charleston State: SS SC Zip: 29406

Email Address: sdolan@louisberger.com

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

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Your Name: SACHIN JOSHI

Employer: IIPL USA

Address: 1940 DUKE STREET, SUITE 200
ALEXANDRIA, VA - 22314

Phone: 703 486 5620

Cell: 703 577 1900

Fax: 703 486 5619

City: ALEXANDRIA State: VA Zip: 22314

Email Address: sachin.joshi@ilpsindia.com

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

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Your Name: Michelle Sheplan

Employer: TME Enterprises Inc.

Address: 4039 Buell Street

Phone: _____

Cell: 407-335-9118

Fax: _____

City: Chesapeake State: VA Zip: 23324

Email Address: michelle.sheplan@tmeenterprises.com

Your Name: Richard Collepore

Employer: American Lighting & Signalization Inc

Address: 4200 Church St - Suite 1042
Santaro FL

Phone: 407 328 3131

Cell: 407 9474766

Fax: _____

City: Santaro State: FL Zip: 32771

Email Address: RCollepore@Asplmsh.com

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Your Name: _____

Employer: _____

Address: _____

Phone: _____

Cell: _____

Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____