

# **Private Provider Company Info**

**for** Columbia County

**at** PO BOX 1529

## **Private Provider Company**

**Private Provider Firm:** Freedom Code Compliance

**Firm Address:** 500 NW University Blvd. Suite 115, Port St. Lucie, FL

**Office Phone:** ( 772) 278- 8924

**Office Email:** ops@freedomcodecompliance.com

**EIN:** 92- 3575289

**Insurance Policy Numbers:** N9PL537296, N9BP655695, N9WC655251

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# Duly Authorized Representative Individual



**Name:** John Boden  
**Phone:** 13865665044  
**Email:** ops@freedomcodecompliance.com



## License Information

**Plan Review:** PX3983                      **Inspector:** BN7233

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential	X	X	X	X
Commercial	X	X	X	X

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential	X	X	X	X
Commercial	X	X	X	X

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** John Boden                      **Signature:**

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie

**SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this** 21st **day of**  
November, **20** 25, **by** John Boden.

**Notary Name** Kesle Ffrench

**Notary Public Signature**





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Melanie S. Griffin, Secretary



**STATE OF FLORIDA**  
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**  
**BUILDING CODE ADMINISTRATORS & INSPECTOR**

THE STANDARD INSPECTOR HEREIN IS CERTIFIED UNDER THE  
PROVISIONS OF CHAPTER 468, FLORIDA STATUTES  
ELEC. RESI. BLDG. MECH. CCI PLUM

**BODEN, JOHN JOSEPH JR**  
27 DARTMOUTH TRACE  
ORMOND BEACH FL 32174

**LICENSE NUMBER: BN7233**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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ELEC, BLDG, MECH, PLUM

**BODEN, JOHN JOSEPH JR**

27 DARTMOUTH TRACE  
ORMOND BEACH FL 32174

**LICENSE NUMBER: PX3983**

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**BODEN, JOHN JOSEPH JR**

27 DARTMOUTH TRACE  
ORMOND BEACH FL 32174

**LICENSE NUMBER: BU2030**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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**BODEN, JOHN JOSEPH JR**  
27 DARTMOUTH TRACE  
ORMOND BEACH FL 32174

**LICENSE NUMBER: RPX319**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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# Duly Authorized Representative Individual



**Name:** Kevin Klepac  
**Phone:** 7723219366  
**Email:** ops@freedomcodecompliance.com



## License Information

**Plan Review:** PBP1778, PX5451      **Inspector:** BN9518

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential	X	X	X	
Commercial	X			

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential	X	X	X	X
Commercial	X			

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** Kevin Klepac      **Signature:** 

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie  
**SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this** 4th **day of**  
November, **20** 25, **by** Kevin Klepac.

**Notary Name** Kesle Ffrench

**Notary Public Signature** 



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BLDG

**KLEPAC, KEVIN JEFFREY**

1295 66TH AVE  
VERO BEACH FL 32966

**LICENSE NUMBER: PX5451**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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**KLEPAC, KEVIN JEFFREY**

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VERO BEACH FL 32966

**LICENSE NUMBER: PBP1778**

**EXPIRATION DATE: APRIL 28, 2027**

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**KLEPAC, KEVIN JEFFREY**

1295 66TH AVE  
VERO BEACH FL 32966

**LICENSE NUMBER: PBC424**

**EXPIRATION DATE: AUGUST 12, 2026**

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RESI

**KLEPAC, KEVIN JEFFREY**

1295 66TH AVE  
VERO BEACH FL 32966

**LICENSE NUMBER: BN9518**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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ISSUED: 10/30/2025

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# Duly Authorized Representative Individual



**Name:** Craig Schneider  
**Phone:** 2392932352  
**Email:** ops@freedomcodecompliance.com



## License Information

**Plan Review:** PX4497                      **Inspector:** BN7972

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential				
Commercial				X

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential				X
Commercial				X

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** Craig Schneider                      **Signature:** 

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie  
**SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this** 5th **day of**  
November, **20** 25, **by** Craig Schneider.

**Notary Name** Kesle Ffrench

**Notary Public Signature** 



# **Craig A Schneider**

**(239) 293-2352**

**Email**

**[cas9809@aol.com](mailto:cas9809@aol.com)**

## **Objective**

Results-driven Management professional with 30 years of experience in Plumbing, Construction and Facilities Operations, production management, organizational development and team building within diverse industries. Highly adept in planning, coordinating, and executing successful production strategies. History of improving operational stability, efficiency, and profitability. Effectively prioritizing activities, translating business requirements into solutions and achieving objectives.

## **Employment History**

### **Company/Agency**

Freedom Code Compliance

500 NW University Blvd #115/116

Port St Lucie, FL 34986

772-278-8924

Building Inspector/Plan Review

Plumbing/Mechanical/Gas/Medical Gas

Hours/Weekly 20-25

July 2025-Present

### **Company/Agency**

City of Sanibel

2475 Library Way

Sanibel, FL 33957

239-293-2352

Building Inspector

**Hours/Week** 50

**Dates**

January 2024 - Present

**Supervisor**

Chris Rosinski, Lead Inspector

**Duties Summary**

All plumbing, electrical residential, residential inspections, gas, and structural

**Company/Agency**

Collier County Growth Management Division

2800 N Horseshoe Drive

Naples, FL 34104

239-252-2400

Plan Review

**Hours/Week** 44

**Dates**

July 2019 – January 2024

**Supervisor**

Robert Cornetta, Chief Plumbing Inspector

**Reason For Leaving:**

Opportunity to advance my career.

**Duties Summary**

Plumbing, Gas, Swimming Pools, and Medical Gas review both commercial and residential Assist contractors and public with codes and application submittals Attend all training seminars and meetings.

**Company/Agency**

PRO-TEC Plumbing

3900 Arnold Avenue

Naples, FL 34104

239-261-1000

Senior Project Manager

**Hours/Week 50****Dates**

August 2017 - July 2019

**Supervisor**

Rick Hume, Owner

**Reason For Leaving:**

Looking to return to Code Enforcement

**Duties Summary**

Oversaw budgets for project, tracked expenses and timelines and communicated with key stakeholders on milestones. Assessed project risks and devised mitigation actions encompassing close attention to contracts and service level agreements by subcontractors and vendors, external dependencies, and potential roadblocks. Directed service delivery projects through evaluation, determination and delegation of staffing needs, client assignments, capacity planning and project-specific profitability. Established relationships with construction managers and contractors to align priorities, goals, and objectives. Visited locations to observe operations and determine opportunities to streamline processes and achieve cost reductions. Managed submittals and processing of requests for information between general contractor, owner, and owner's consultants. Evaluated, determined, and delegated tasks to staff based on client needs, capacity planning project-specific initiatives. Spearheaded key projects, resulting in high customer satisfaction and increased business revenues.

**Company/Agency**

Sanibel Plumbing

2244 Periwinkle Way Suite 13

Sanibel, FL 33957

239-472-1101

Operations Manager

**Hours/Week** 50

**Dates**

October 2015 - August 2017

**Supervisor**

Joel Goodman, Owner

**Reason For Leaving:** Owners had an agreement to sell 10% of the business and become a partner after a certain amount of revenue was brought in. This did not happen.

**Duties Summary**

Collaborated with staff to maximize customer satisfaction, streamline procedures, and improve bottom-line profitability. Established organizational vision and developed strategies to achieve sales and customer service goals. Mitigated risk by promoting regulatory compliance for representative licensing and contraction protocol. Recruited, hired, and trained crew members on application of projects, customer relations and customer service. Established work priorities to meet contractual obligations for schedule and installations. Consulted with buyers and sellers to coordinate statements, payment schedules and cost analyses. Coordinated customer inspection clinic for retail customers to meet with vehicle line products and brand managers. Assessed, optimized, and elevated operations to target current and expected demands. Reviewed daily financial reports and reconciled accounts to keep information current and accurate. Delivered positive customer experiences by implementing effective quality assurance practices. Conducted performance reviews providing coaching and feedback to benefit both company and employee. Contributed to development and evaluation of service level agreements that complied with established operational parameters. Directed day-to-day operations by spearheading implementation of short-term and long-term strategies to achieve business plan and profitability goals.

## Education

**School Name**

William Patterson College

**Type**

College/University

**Address**

Wayne, NJ

**Major/Minor**

Construction Management

**Degree**

No Degree

**Units Completed****Unit Type**

Semester

**Dates**

September 2000 - May 2002

**Did you graduate?**

Yes

**School Name**

Bergen Community College

**Type**

College/University

**Address**

Paramus, NJ

**Major/Minor:** Mechanical & Refrigeration Certifications

**Degree**

No Degree

**Dates**

January 1999 - May 1999

**Did you graduate?**

Yes

**School Name**

Bergen Community College

**Type**

College/University

**Address**

Paramus, NJ

**Major/Minor**

Business Management

**Degree**

No Degree

**Dates**

November 1997 - February 1998

**Did you graduate?**

Yes

**School Name**

Plumbers Local #14

**Type**

Professional

**Address**

Lodi, NJ

**Major/Minor**

Plumbing/Journeyman

**Degree**

Certification

**Dates**

September 1979 - June 1983

**Did you graduate?**

Yes

**School Name**

Hackensack High School

**Type**

High School

**Address**

Hackensack, NJ

**High School Highest Education Level**

12

**Degree**

High School Diploma

**Dates**

September 1971 - June 1975

**Did you graduate?**

Yes

**GED Received****Professional Licenses**

Fire safety Inspector I

**Date Issued** February 2022

**Expiration Date** March 2026

**Number**

193649

**Issued By:** Division of State Fire Marshal

**Type**

Plumbing Inspector

**Date Issued**

March 2020

**Expiration Date**

November 2025

**Number**

BN7972

**Issued By**

DBPR

**Type**

Plumbing Plan Examiner

**Date Issued**

August 2019

**Expiration Date**

November 2025

**Number**

PX4497

**Issued By**

DBPR

**Type**

Medical Gas Systems Inspector ASSE 6020

**Date Issued** August 2019

**Expiration Date**

August 2025

**Number**

08192020-1081

**Issued By**

FMG

**Technical****Description**

Code Enforcement Officer - NJ Master Plumber License - BIO9809

NJ HHS Plumbing Sub-Code Official License - 007933

NJ 10 Hour OSHA Occupation Safety and Health Training

NJ & FL 30 Hour OSHA Occupational Safety and Health Training

FL Bergen County Police and Fire Academy (FF1, FF2, FF3, Incident Command, Officers Training, Company Training, Advance Company Training, Haz-Mat Training Level 1, Extrication and Pump Training)

Track Pipe CSST

SS Gas Pipe Certified Water Safe Certified Installer

FL Domestic Booster Pump Certification (Canariis Booster Pumps)

First Aid Certified (expired)

CPR Certified (expired)

Hoisting and Rigging

Certification Plumbing Inspector License - BN7972

FL Plumbing Plan Examiner License - PX4497

FL Medical Gas Inspector ID#08192020-1081

FL Medical Gas Plan Examiner ID#08192020-1081

Fire Inspector I Plans Examiner Lic#251040

Mechanical Inspector License #PM1891

Mechanical Plan Review License #PMP528

Residential Inspector License #PRI1311

### **Honors & Awards**

Fireman of the Year Award 1991 Life Saving Award (Rescue of a citizen from a fully involved house Fire where an oil burner exploded)

Life Saving Award (Rescue of a citizen from a fully involved house Fire)

Unit Citation Award (Hurricane Floyd assisted in rescue of citizens trapped in houses from flooding)

Unit Citation Award (Companywide award for house Fire where oil burner exploded)

Unit Citation Award (Companywide award for house Fire fully involved)

## **Volunteer Experience**

Volunteer Fireman for 25+ years, held the rank of Chief

NJ Volunteer EMS 20 years

NJ Habitat for Humanity

NJ & FL Community Service Leader

Volunteer National Coalition for Patriots

FL Wounded Warrior Foundation

## **Technical**

### **Description**

Quality Production

Strong technical detailing skills

Custom Plumbing Systems Specialist

Concrete and masonry

Blueprints ISO drawings

MS Office proficient

Construction estimation

Project Planning

QA & QC processes

Knowledge in HVAC ( RTU's, VAV,s, Chillers, Condensers, Pumps, & Controls)

Fire Alarm Systems and Controls Fire Suppression Systems

Stand Pipes and Risers Backflow Preventers

Building Automation Systems

Site planning and design

Underground Utilities



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PLUM

**SCHNEIDER, CRAIG A**

3655 WILD SAGE WAY  
ALVA FL 33920

**LICENSE NUMBER: PX4497**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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**SCHNEIDER, CRAIG A**

3655 WILD SAGE WAY  
ALVA FL 33920

**LICENSE NUMBER: BN7972**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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# Division of State Fire Marshal

BUREAU OF FIRE STANDARDS AND TRAINING  
Hereby Awards this

251040

*FIRESAFETY INSPECTOR I*

**Certificate of Compliance**

to

**CRAIG SCHNEIDER**

*Expires the 31st Day of March, 2026*



By virtue of having met the requirements of Florida  
Statutes and the Rules and Regulations of the  
Division of State Fire Marshal.

*Jimmy Patrick*  
State Fire Marshal

*Mark Hays*  
Bureau Chief

*Julius Halas*  
Director



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**SCHNEIDER, CRAIG A**

20410 BLACK TREE LANE  
ESTERO FL 33928

**LICENSE NUMBER: PRI1311**

**EXPIRATION DATE: APRIL 24, 2026**

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THE PROVISIONAL MECHANICAL PLANS EXAMINER HEREIN IS CERTIFIED UNDER THE  
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**SCHNEIDER, CRAIG A**

20410 BLACK TREE LANE  
ESTERO FL 33928

**LICENSE NUMBER: PMP528**

**EXPIRATION DATE: APRIL 24, 2026**

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**SCHNEIDER, CRAIG A**

20410 BLACK TREE LANE  
ESTERO FL 33928

**LICENSE NUMBER: PBP1666**

**EXPIRATION DATE: APRIL 24, 2026**

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**SCHNEIDER, CRAIG A**

20410 BLACK TREE LANE  
ESTERO FL 33928

**LICENSE NUMBER: PBI2773**

**EXPIRATION DATE: APRIL 24, 2026**

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**SCHNEIDER, CRAIG A**

20410 BLACK TREE LANE  
ESTERO FL 33928

**LICENSE NUMBER: PMI891**

**EXPIRATION DATE: APRIL 24, 2026**

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# Duly Authorized Representative Individual



**Name:** Mario Valdes  
**Phone:** 7862852157  
**Email:** ops@freedomcodecompliance.com



## License Information

**Plan Review:** PX3618                      **Inspector:** BN6698

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential		X	X	X
Commercial			X	

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential			X	
Commercial			X	

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** Mario Valdes                      **Signature:**

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie

**SWORN TO (OR AFFIRMED) AND SUBSCRIBED** before me this 4th day of November, **20** 25, by Mario Valdes.

**Notary Name** Kesle Ffrench

**Notary Public Signature**



# Mario Valdes

813 SW 143 AVE • Pembroke Pines, FL, 33027  
Phone: (786) 285-2157 • E-Mail: juniormvelectrical@gmail.com



## Objective

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Qualified Electrical professional seeking a position that will allow me to be an asset to a company by utilizing my abilities to their fullest.

## Experience

---

### Electrical inspector / plan examiner

### Freedom Code Compliance

04/09/2024 - current

Private Provider

- Inspected all commercial, industrial, residential and public buildings, medical buildings, health care facilities, assisted living and elderly housing complexes.
- Reviewed and approved plans for electrical compliance with federal, state, & local codes. Monitored workmanship and recommended methods of improvements. Worked with engineers, consultants and lawyers to amend plans during the plan review process.
- Maintained detailed records and documentation of all site visits, inspections and violations.
- Calculate documents to improve operations and speed up turn around times while working cooperatively to achieve excellent customer service.
- Administrative capabilities of leading an inspection team in efforts to cover construction deadlines.
- Attended meetings to discuss common grounds regarding electrical comments to engineering drawings
- Ability to interpret NEC codes & apply to practical applications out In the field
- Involved in different organizations such as IAEL, NFPA, BOAF, ICC in order to be informed on new standards
- Experience in large construction such as hi-rise buildings, multi-story residential, commercial build out improvements, schools, hospitals, and industrial motor – controls centers

### Electrical Instructor (Part-time)

### College of Business & Technology

1/15/2017 – current

- Provide NEC code classes to students in electrical associates science program to facilitate their knowledge
- Created entire curriculum including power points, quizzes, midterm, & final exams.
- Effectively educated students on electrical blueprint reading regarding estimating take offs & interpretations of riser diagrams, panel schedules, basic electrical theory of AC & DC fundamentals in wiring, motors, transformers, and generators
- Cover detailed standards in PLC programming, Photovoltaic systems, & Fire alarm systems
- Part of Mike Holt 2017 & 2020 exam preparations video team & certified instructors by his Curriculum.
- Voluntary member of UL standards technical panel for UL869A, UL67, UL1773, & UL98.

## Licenses

---

### State Electrical Contractor

EC13005576

### ICC and State of Florida License- BN6698

Standard Electrical Inspector

### ICC and State of Florida License- PX3618

Electrical Plan Examiner

## Education

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### CBT college

Associates Degree in Electrical Engineering.

In Progress

### Mike Holt Electrical Apprenticeship Program

Master Exam Code preparation.

09/2012

### Turner Tech community college

Electrical fundamentals and code.

01/2012

### HML High School

High School Diploma.

06/2007



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



**STATE OF FLORIDA**  
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**BUILDING CODE ADMINISTRATORS & INSPECTOR**

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PROVISIONS OF CHAPTER 468, FLORIDA STATUTES  
ELEC

**VALDES, MARIO ALBERTO**

813 SW 143 AVE  
PEMBROKE PINES FL 33027

**LICENSE NUMBER: PX3618**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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Melanie S. Griffin, Secretary



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ELEC

**VALDES, MARIO ALBERTO**

813 SW 143 AVE  
PEMBROKE PINES FL 33027

**LICENSE NUMBER: BN6698**

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# Duly Authorized Representative Individual



**Name:** Brian Jordan  
**Phone:** 3214424004  
**Email:** ops@freedomcodecompliance.com



## License Information

**Plan Review:** PX4389      **Inspector:** BN7867

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential		X		
Commercial		X		

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential	X	X		X
Commercial	X			

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** Brian Jordan      **Signature:**

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie

**SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this** 27th **day of** October, **20** 25, **by** Brian Jordan.

**Notary Name** Kesle Ffrench

**Notary Public Signature**





# Brian Jordan

(407) [709-7235](tel:709-7235) • [bullfox407@gmail.com](mailto:bullfox407@gmail.com)

## License and Certification ▼

- *Electrical Inspector*
- *Electrical Plan Review*
- *1 & 2 Family Dwelling Inspector*
- *BN7867 and PX4389*

## Employment ▼

- 1999-2002 **Sonar Technician**, US Navy Arleigh-Burke class destroyer, San Diego  
➤ *Maintained sonar equipment on Navy destroyer*
- 2002-2003 **Courier**, TLS, Orlando, FL  
➤ *Disney Cruise Line account warehousing and logistics*
- 2003-2009 **Electrician**, Various Electrical Contractors, St. Cloud, FL  
➤ *Commercial, Residential, and Industrial work as a licensed journeyman*
- 2009-2010 **Solar Technician**, Sure-Temp Manufacturing, Fort Myers, FL  
➤ *Install and service DC solar panels and power inverters to AC grid*
- 2010-2011 **Cellular Technician**, C-mark, Orlando, FL  
➤ *Built and serviced AT&T cellular sites for carrier upgrading*
- 2011-2012 **Microsoft Office Specialist Cert**, TECO, Kissimmee, FL  
➤ *Certified IT assistant*
- 2012- 2015 **Engineer**, SMG, Osceola Heritage Park, Kissimmee, FL  
➤ *Facility maintenance and do exhibitions, shows, and, banquets*
- 2015- 2019 **Maintenance Technician**, Osceola County BOCC, Kissimmee, FL  
➤ *Facilities maintenance. Electrical, Plumbing, Mechanical, and supervise vendors*
- 2019- Current **Building Inspector and Plan Review** Osceola County BOCC, Kissimmee, FL  
➤ *Commercial Electrical and Residential 1 & 2 Family*

## Education Coursework ▼



### Edit with the Docs app

Make tweaks, leave comments, and share with others to edit at the same time.

Degree

1 Engineering Technology

NO THANKS

GET THE APP

- *Industrial Engineering*
- *Customer Service*
- *Communication*
- *GIS*

# FREEDOM CODE COMPLIANCE

Ron DeSantis, Governor

Melanie S. Griffin, Secretary



**STATE OF FLORIDA**  
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**BUILDING CODE ADMINISTRATORS & INSPECTOR**

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ELEC

**JORDAN, BRIAN**  
1335 ENGLEWOOD DR  
ST. CLOUD FL 34772

**LICENSE NUMBER: PX4389**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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Melanie S. Griffin, Secretary



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ELEC, RESI, MECH

**JORDAN, BRIAN**  
1335 ENGLEWOOD DR  
ST. CLOUD FL 34772

**LICENSE NUMBER: BN7867**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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ISSUED: 09/17/2025

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*Brian Jordan*

# Private Provider Individual



**Name:** Michael Williams  
**Phone:** 7722788924  
**Email:** ops@freedomcodecompliance.com



## License Information

**Private Provider:** BU2215

**Plan Review:** PX4949      **Inspector:** BN7822

PLAN REVIEW	BLD	MECH	ELEC	PLUMB
Residential	X			
Commercial	X			

INSPECTIONS	BLD	MECH	ELEC	PLUMB
Residential	X	X	X	X
Commercial	X			

## Qualification Statement

I hereby declare that **I hold the above-referenced Florida licenses and possess the qualifications and experience required to perform plan reviews and building inspections** in compliance with all applicable codes. **Professional liability insurance is maintained** as required by law. I further state that **I am an employee of Freedom Code Compliance, eligible for reemployment assistance** under Chapter 443, thereby fulfilling the bona fide employer-employee requirement for private provider services under Florida law 553.791.

**Name:** Michael Williams      **Signature:**

## Notary

**STATE OF FLORIDA, COUNTY OF** St. Lucie

**SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this** 4th **day of**  
November, **20** 25, **by** Michael Williams.

**Notary Name** Kesle Ffrench

**Notary Public Signature**



B



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**Objective**

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**Qualifications**

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fchUfchU0 TH2 4 v w K R 4 i  
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fchUfchU0 8 0 z - z w  
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**Education**

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w z w R M hUf  
8 K 1 K hUU



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



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BLDG

**WILLIAMS, MICHAEL V**

2217 CITRUS BREEZE DR.  
BRADENTON FL 34208

**LICENSE NUMBER: PX4929**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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BLDG, RESI

**WILLIAMS, MICHAEL V**

2217 CITRUS BREEZE DR.  
BRADENTON FL 34208

**LICENSE NUMBER: BN7822**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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**WILLIAMS, MICHAEL V**

2217 CITRUS BREEZE DR.  
BRADENTON FL 34208

**LICENSE NUMBER: BU2215**

**EXPIRATION DATE: NOVEMBER 30, 2027**

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

□□□□□□□□

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  1KSd s 50hh0  6dS	CONTACT NAME:		
	PHONE (A/C, No, Ext):	□□□□□□□□□□	FAX (A/C, No):
	E-MAIL ADDRESS:	□□□□ □□□□ □□□□□□□□□□	
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	INSURER B :	□□□□□	
	INSURER C :	□□□□□	
	INSURER D :		
	INSURER E :		
	INSURER F :		

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
□	<b>COMMERCIAL GENERAL LIABILITY</b>						EACH OCCURRENCE	\$ □□□□□□□□
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	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$ □□□□
	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>						PERSONAL & ADV INJURY	\$ □□□□□□□□
	OTHER:						GENERAL AGGREGATE	\$ □□□□□□□□
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
	SCHEDULED AUTOS							\$
	NON-OWNED AUTOS ONLY							\$
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	DED							\$
	RETENTION \$							\$
□	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/>	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in H)	Y/N					E.L. EACH ACCIDENT	\$ □□□□□□
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	□□□□□□□□□□	□□□□□□□□	□□□□□□□□	E.L. DISEASE - EA EMPLOYEE	\$ □□□□□□
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Operations: Private Provider Plan Review &amp; Inspections

Michael Williams is listed as additional insured on general liability.

**CERTIFICATE HOLDER****CANCELLATION**

Columbia County Building Department  
135 NE Hernando Avenue  
Lake Citv. FL 32055

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



# CITY OF PORT SAINT LUCIE BUSINESS TAX RECEIPT

PLEASE POST IN CONSPICUOUS PLACE OR KEEP ON PERSON

TERM: 10/01/2025 - 09/30/2026

## 2025 - 2026

BTR: 155586

Date Made: 7/31/2025

**Business Name:** FREEDOM CODE COMPLIANCE CORP  
**Owner Name:** BARRY, JOSHUA  
**Business Address:** 500 NW UNIVERSITY BLVD STE 115  
PORT ST LUCIE, FL 34986

Business Tax  
Authority

**Business Services:**

PROFESSIONAL ASSOCIATION	\$268.00
BUILDING CODE ADMINISTRATORS AND INSPECTIORS	\$268.00

**THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE**

This receipt does not guarantee that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provided the necessary documentation (if required) for this business. Valid only when all state and local regulated trade licenses/competency cards are valid for the current fiscal year as required by law.