

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90024 033 ****61.25

DOCUMENT # N22035			
1. Entity Name FLORIDA ELECTRICAL APPRENTICESHIP & TRAINING, INC.			
Principal Place of Business 2900 W OAK RIDGE RD 1600 ORLANDO, FL 32809 US		Mailing Address PO BOX 592949 ORLANDO, FL 32859 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



02022005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2866435

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SASSO, MICHAEL 390 N ORANGE AVENUE, STE 2700 ORLANDO, FL 32801		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

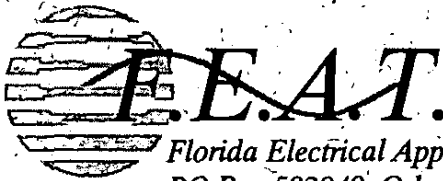
Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FREINER, MICHAEL 630 KISSIMMEE AVE. OCOE, FL 34761 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CROSS, KENNETH 530 W. GRAND STREET ORLANDO, FL 32805 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIFFORD, PAUL 1428 E SEMORAN BLVD SUITE 120 APOPKA, FL 32703 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, JIM 430 WEST DRIVE ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLOETHNER, CRAIG 411 W. ENTERPRISE ST. OCOE, FL 34761 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHEETS, DAVID 430 WEST DRIVE ALTAMONTE SPGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Craig Bloethner* **CRAIG BLOETHNER** **PRESIDENT** **2/15/05** **407-438-3322**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Florida Electrical Apprenticeship & Training, Inc.
PO Box 592949, Orlando, FL 32859-2949

ATTACHMENT

50017368

(407) 438-3328
FAX (407) 438-8202

Florida Electrical Apprenticeship & Training, Inc.
Addendum to Document #N22035

Title D
Name Wallace, Carl
Street Address 630 Kissimmee Ave.
City-St-Zip Ocoee, FL 34761

Title D
Name Riche, David
Street Address 2530 JMT Industrial Dr.
City-St-Zip Apopka, FL 32703