

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704675

FILED
Apr 28, 2004
Secretary of State

Entity Name: ELECTRICAL COUNCIL OF FLORIDA, INCORPORATED

Current Principal Place of Business:

6107-B MEMORIAL HWY
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

6107-B MEMORIAL HWY
TAMPA, FL 33615

New Mailing Address:

FEI Number: 59-1154660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GANG, NENA
6107-B MEMORIAL HWY
TAMPA, FL 33615

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PPD () Delete
Name: APPLER, DAVE
Address: 400 SW 2ND AVE.
City-St-Zip: MIAMI, FL

Title: PPD () Delete
Name: HUNTOON, DAVE
Address: 1871 OLD OKEECHOBEE RD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: PPD () Delete
Name: PETERSON, WILLIAM
Address: 521 W CENTRAL BLVD
City-St-Zip: ORLANDO, FL 32801

Title: PPD () Delete
Name: CONE, JENNIFER
Address: 215 MAIN ST
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: GANG, NENA
Address: 6107 B MEMORIAL HWY
City-St-Zip: TAMPA, FL 33615

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: TUBBS, GARY
Address: 4496 SW 36TH STREET
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NENA GANG

ED

04/28/2004

Electronic Signature of Signing Officer or Director

Date