

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744403

Entity Name: ELECTRICAL CONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.**FILED**
Mar 16, 2020
Secretary of State
9748947756CC**Current Principal Place of Business:**906 WEST MAIN STREET
PENSACOLA, FL 32502**Current Mailing Address:**PO BOX 18363
PENSACOLA, FL 32523 US**FEI Number: 59-2072922****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KELSON, MICHELE B
906 WEST MAIN ST.
PENSACOLA, FL 32502 US*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

Officer/Director Detail :

Title	SECRETARY, TREASURER, DIRECTOR
Name	NELSON, CHARLES ERVIN
Address	6766 NICHOLAS DRIVE
City-State-Zip:	MILTON FL 32570

Title	DIRECTOR
Name	OLIVER, DUSTIN S
Address	1811 BLACKBIRD LANE
City-State-Zip:	PENSACOLA FL 32534

Title	PRESIDENT, DIRECTOR
Name	BELEW, JOHN B
Address	333 MASSACHUSETTS AVENUE
City-State-Zip:	PENSACOLA FL 32505

Title	D
Name	SMITH, RODNEY
Address	9220 PINE FOREST RD
City-State-Zip:	PENSACOLA FL 32534

Title	D
Name	MCCOMBS, MICHAEL
Address	5217 HIGHWAY 90
City-State-Zip:	MILTON FL 32572

Title	VP, DIRECTOR
Name	STURDIVANT, GARY D
Address	6455 HERMITAGE DRIVE
City-State-Zip:	PENSACOLA FL 32504

I hereby 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 all other like empowered.

SIGNATURE: GARY D. STURDIVANT**VICE PRESIDENT****03/16/2020**

Electronic Signature of Signing Officer/Director Detail

Date