2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22035

Entity Name: FLORIDA ELECTRICAL APPRENTICESHIP & TRAINING, INC.

FILED Jan 23, 2023 **Secretary of State** 5081203032CC

Current Principal Place of Business:

2900 W OAK RIDGE RD BLDG. 1600 ORLANDO, FL 32809

Current Mailing Address:

PO BOX 592949

ORLANDO, FL 32859 US

FEI Number: 59-2866435 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TIDWELL, ROBERT 1720 TERRA ALTA CT. APOPKA, FL 32703 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: ROBERT TIDWELL 01/23/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **TREASURER**

Name FERGUSON, BLAKE Name THOMPSON, STEVE Address 645 NEWBURYPORT AVENUE Address 630 MAGUIRE ROAD

SUITE 1000

City-State-Zip: OCOEE FL 32761 ALTAMONTE SPRINGS FL 32714 City-State-Zip:

Title **PRESIDENT DIRECTOR** Title Name SHEETS, DAVE Name TERRITO, ANNA

Address 430 WEST DRIVE Address 411 W. ENTERPRISE ST.

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: OCOEE FL 34761

Title VICE-PRESIDENT DIRECTOR Title Name

CARTER, GREG TRAWICK, DANIEL Name 2530 JMT INDUSTRIAL DRIVE Address

600 THACKER AVENUE Address

City-State-Zip: APOPKA FL 32703 City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR **SECRETARY**

Title Name THOMAS, NOBLE Name EVANS, GREG

Address 650 GEM COMMERCE CT. 430 WEST DRIVE Address

APOPKA FL 32703 City-State-Zip: City-State-Zip: ALTAMONTE SPRINGS FL 32714

Continues on page 2

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.

01/23/2023 SIGNATURE: ROBERT TIDWELL PROGRAM DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title PROGRAM DIRECTOR Title ASSISTANT PROGRAM DIRECTOR

NameTIDWELL, ROBERTNameCAUSEY, JAMES SCOTTAddress1720 TERRA ALTA CT.Address105 E. PALM STREET

City-State-Zip: APOPKA FL 32703 City-State-Zip: DAVENPORT FL 33837