

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # 714136

1. Entity Name
**FRATERNAL ORDER OF TELEPHONE AND ELECTRICAL
WORKERS, INC.**



Principal Place of Business

**2141 JACKSON STREET
FORT MYERS, FL 33901**

Mailing Address

**2141 JACKSON STREET
FORT MYERS, FL 33901**

DO NOT WRITE IN THIS SPACE



01052004 No Chg-NP

CR2E037 (10/03)

4. FEI Number
59-0769520

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CRADDOCK, RICHARD K
2203 N.E. 3RD STREET
CAPE CORAL, FL 33909**

**DO NOT WRITE
IN THIS SPACE**

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

Richard K. Craddock

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
JARBO, JAMES
5043 CORAL WOOD DRIVE
NAPLES, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
WOODARD, BRENDEL
4422 GLENWOOD AVE
FORT MYERS, FL 33905**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BROWNING, LINDA
2113 RIVER RIDGE BLVD
FORT MYERS, FL 33905**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARROLL, TERRY
1604 PIONEY RD
N. FORT MYERS, FL 33903**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SHADLE, HARRY JR
6971 ESSEX DR
FORT MYERS, FL 33919**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PARR, CHARLES M
17160 OALOOSA TRACE CIR
FORT MYERS, FL 33912**

**DO NOT WRITE
IN THIS SPACE**

UN00000063915

02/23/04-80178-016 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

James W Jarbo

JAMES W JARBO

2/18/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #