

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90086 031 \*\*\*\*61.25

**DOCUMENT # 719160**

1. Entity Name

**LOCAL 676, PENSACOLA ELECTRICAL WORKERS FRATERNA**

Principal Place of Business

Mailing Address

**7830 N PALAFOX  
PENSACOLA FL 32534****7830 N PALAFOX  
PENSACOLA FL 32534-4430**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**59-0449781**

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**MANLY, JON L  
6403 RAMBLER DR  
PENSACOLA FL 32503**

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.

SIGNATURE

*Jon L. Manly*  
Signature, typed or printed name of registered agent and title if applicable**Jon L. Manly, Business Manager****4-28-00**

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
FEE IS \$61.25**9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00 May Be  
Added to Fees****Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
SD	MANLY, JON L	6403 RAMBLER DR	PENSACOLA FL 32503				
S	NORED, W.S.	PO BOX 362	GULF BREEZE FL 32561	S	James M. Pate, Jr.	P. O. Box 3338	Pensacola, FL 32516-3338
TD	LOWERY, MITCHELL	65 HWY 90 W	HOLT FL 32564				
PD	WATSON, ROBERT D	5485 DEERWOOD RD	PENSACOLA FL 32526	PD	John H. Lord	8041 Virginia Lane	Milton, FL 32570
				VP	Reagan L. McDaniel	2530 Farris Avenue	Pensacola, FL 32526
				EB	Vincent V. Noa, Jr.	1475 Oak Drive	Gulf Breeze, FL 32561

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:

*Jon L. Manly*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**Jon L. Manly, Business Manager 850-477-8767**

1-28-00

Daytime Phone #

CR2E037 (9/99)