


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90090 042 ****61.25

DOCUMENT # 719160 1. Entity Name LOCAL 676, PENSACOLA ELECTRICAL WORKERS FRATERNAL AND SOCIAL SOCIETY, INC.					
Principal Place of Business 7830 N PALAFOX STREET PENSACOLA, FL 32534 US			Mailing Address 7830 N PALAFOX STREET PENSACOLA, FL 32534 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country			
4. FEI Number 59-3663151				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCDANIEL, REAGAN L 2530 FARRIS AVE PENSACOLA, FL 32526			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATE, JAMES M JR 5525 W. JACKSON STREET PENSACOLA, FL 32506	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JAMES H. VARNEDOE 7598 Harvey Street Pensacola, FL 32506
<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RICHARDSON, TERRY W 5556 DELONA ROAD MILTON, FL 32583	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BEVERLY, PATRICK 2456 KINGSTON ROAD CRESTVIEW, FL 32536	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOR, KATHERINE A 5612 EAST BAY BLVD. GULF BREEZE, FL 32561	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ray L. Carpenter 285 Chestnut Street Pensacola, FL 32506
<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JORDAN, RODNEY L 939 HIGHLAND BLVD. PACE, FL 32571	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Richard A. Jackson 2421 E. Olive Road Pensacola, FL 32514
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARNEDOE, JAMES H 7598 HARVEY DTREET PENSACOLA, FL 32506	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Donald E. Rains P.O. Box 1 New Castle, IN 47362
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
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: <i>J.H. Varnedoe</i> J.H. VARNEDOE			04 FEB 05		850-477-8767
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>

50011109



02042005 Chg-NP CR2E037 (10/03)

ATTACHMENT

#719160

50011109

PD
JAMES H. VARNEDOE
7598 Harvey Street
Pensacola, FL 32506

D
RAY L. CARPENTER
285 Chestnut Street
Pensacola, FL 32505

D
RICHARD A. JACKSON
2421 E. Olive Road
Pensacola, FL 32514

D
DONALD E. RAINS
P O Box 1
New Castle, IN 47362