

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720504

FILED
Apr 01, 2009
Secretary of State

Entity Name: FLORIDA WEST COAST CHAPTER, NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC.

Current Principal Place of Business:

2103 WEST CASS STREET
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

2103 WEST CASS STREET
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-0694782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPPERSMITH, ROBERT R
2103 WEST CASS STREET
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SM () Delete
Name: COPPERSMITH, ROBERT R
Address: 2103 WEST CASS STREET
City-St-Zip: TAMPA, FL 33606 US

Title: VP () Delete
Name: WILSON, DAVID C
Address: 2525 DRAINFIELD ROAD, SUITE 23
City-St-Zip: LAKELAND, FL 33811 US

Title: P () Delete
Name: MAZUR, MARK J
Address: 3225 E. 4TH AVE
City-St-Zip: TAMPA, FL 33605 US

Title: T () Delete
Name: COLLINS, BENNY
Address: 2730 S FALKENBURG RD
City-St-Zip: RIVERVIEW, FL 33578 US

Title: D () Delete
Name: OLIVE, SANDRA J
Address: 602 BRANNEN RD
City-St-Zip: LAKELAND, FL 33813 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT R COPPERSMITH

SM

04/01/2009

Electronic Signature of Signing Officer or Director

Date