

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744403

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** ELECTRICAL CONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

906 WEST MAIN STREET  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18363  
PENSACOLA, FL 32523 US

**New Mailing Address:**

**FEI Number:** 59-2072922

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KELSON, MICHELE B  
906 WEST MAIN ST.  
PENSACOLA, FL 32502 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: TD  
Name: GILL, ROBERT  
Address: 75 BRENT LANE  
City-St-Zip: PENSACOLA, FL 32503

Title: D  
Name: TATE, STEVE  
Address: 2339 TRUMAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: D  
Name: HAWKINS, DAVID  
Address: 9220 PINE FOREST RD  
City-St-Zip: PENSACOLA, FL 32534

Title: PD  
Name: DANLEY, RAY  
Address: 2409 W. DELANO ST  
City-St-Zip: PENSACOLA, FL 32505

Title: SD  
Name: NELSON, CHARLES E  
Address: 6639 DEARBORN STREET  
City-St-Zip: MILTON, FL 32570

Title: VD  
Name: FELL, FRED  
Address: 901 CONCORDIA BLVD.  
City-St-Zip: PENSACOLA, FL 32505

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.

SIGNATURE: RAY DANLEY

PD

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date