

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005315

FILED  
Jan 03, 2006  
Secretary of State

**Entity Name:** JACKSONVILLE ELECTRICAL JOINT APPRENTICESHIP AND TRAINING COMMITTEE, INC.

**Current Principal Place of Business:**

4951 RICHARD ST  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

4951 RICHARD ST  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 59-0582582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPARKS, LINDA  
4951 RICHARD ST  
JACKSONVILLE, FL 32207 US

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

SPARKS, LINDA S ED.D.  
4951 RICHARD ST.  
JACKSONVILLE, FL 32207 US

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: LINDA S. SPARKS

01/03/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MURPHY, MICHAEL  
Address: 2251 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D ( ) Delete  
Name: LIBRANDI, JOHN  
Address: 2251 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D ( ) Delete  
Name: LEDERMAN, TONY  
Address: 647 E 27TH ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: HARPER, RUSSELL  
Address: 966 LIBERTY ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: JONES, ALAN  
Address: 966 LIBERTY ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete  
Name: ALFORD, MONICA  
Address: 966 LIBERTY ST  
City-St-Zip: JACKSONVILLE, FL 32206

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LONG, DAVID  
Address: 2251 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D (X) Change ( ) Addition  
Name: WITT, ED JR.  
Address: 2251 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

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

Title: D (X) Change ( ) Addition  
Name: SCARLE, RON  
Address: 966 LIBERTY ST  
City-St-Zip: JACKSONVILLE, FL 32206

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 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: LINDA S. SPARKS

OFFI

01/03/2006

Electronic Signature of Signing Officer or Director

Date