

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90117 014 ****70.00

DOCUMENT # N96000003181

1. Corporation Name

**INDEPENDENT ELECTRICAL CONTRACTORS OF SOUTHWEST
FLORIDA, INC.**

Principal Place of Business

2520-D DAVIS BLVD
NAPLES FL 34104
US

Mailing Address

2520-D DAVIS BLVD
NAPLES FL 34104
US



2. Principal Place of Business

21 3702 ESTEY AVE.

Suite, Apt. #, etc.

22 #606

23 City & State
NAPLES Florida

24 Zip 34104 25 Country US

2a. Mailing Address

26 P.O. Box 7878

Suite, Apt. #, etc.

27
28 City & State
Naples Florida

29 Zip 34101-7878 30 Country US

3. Date Incorporated or Qualified

06/13/1996

4. FEI Number

65-0662253

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

VAN DUYN, WILLIAM
3773 DOMESTIC AVE
NAPLES FL 34104

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TO ☒ DELETE

NAME NUSZ, MARVIN D
STREET ADDRESS 4273 ENTERPRISE AVENUE
CITY-ST-ZIP NAPLES FL

TITLE VD ☐ DELETE

NAME LAWTON, DENNIS
STREET ADDRESS 3984 PROGRESS AVENUE
CITY-ST-ZIP NAPLES FL

TITLE SD ☐ DELETE

NAME BALTERMAN, CINDY
STREET ADDRESS 2016-A TRADE CENTER WAY
CITY-ST-ZIP NAPLES FL

TITLE PD ☐ DELETE

NAME VAN DUYN, WILLIAM
STREET ADDRESS 3773 DOMESTIC AVE
CITY-ST-ZIP NAPLES FL 34104

TITLE D ☐ DELETE

NAME DETWEILER, TRACY
STREET ADDRESS 4427 EXCHANGE AVENUE STE C
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TO ☒ Change ☐ Addition

1.2 NAME NUSZ, DUANE
1.3 STREET ADDRESS 4273 Enterprise Avenue
1.4 CITY-ST-ZIP Naples, FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cynthia A. Balterman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/99

941-598-3980

CR2E037 (11/98)

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