

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT# P97000020234	
1. EntityName NATIONALELECTRICALMANUFACTURERS REPRESENTATIVESASSOCIATION-FLORIDACHAPTER, INC.	

PrincipalPlaceofBusiness 8570NW68ST MIAMI,FL33166US	MailingAddress 8570NW68ST MIAMI,FL33166US
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DO NOT WRITE IN THIS SPACE



04112004 NoChg-P CR2E034(10/03)

4. FEINumber NOTAPPLICABLE	AppliedFor NotApplicable
5. CertificateofStatusDesired ☐	\$8.75 Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent EFNELSON C/OACTIONELECTRICALSALISING 8570NW68ST MIAMI,FL33166

**DO NOT WRITE
IN THIS SPACE**

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.	
SIGNATURE _____ Signature,typedorprintednameofregisteredagentandtitleifapplicable	DATE _____ (NOTE RegisteredAgent'ssignatureisrequiredwhenre-instating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. ElectionCampaignFinancing TrustFundContribution ☐ \$5.00 MayBe AddedtoFees
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10. OFFICERSANDDIRECTORS	
TITLE NAME STREETADDRESS CITY-ST-ZIP	T NELSON,EDWARDP 8570NW68ST MIAMI,FL33166
TITLE NAME STREETADDRESS CITY-ST-ZIP	ST WACKER,DON 512PUERTACT ALTAMONTESPRINGS,FL32701
TITLE NAME STREETADDRESS CITY-ST-ZIP	P MCCLARNON,TIMOTHY 8570NW68ST MIAMI,FL33166
TITLE NAME STREETADDRESS CITY-ST-ZIP	
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TITLE NAME STREETADDRESS CITY-ST-ZIP	

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05/05/04-80051-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. IherebycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedinSection119.07(3)(i),FloridaStatutes.Ifurthercertifythattheinformation indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath;thatIamano officerordirector ofthecorporationorthereceiverortrusteeempoweredtoexecutethisreportasrequiredbyChapter607,FloridaStatutes,an changed,oronanattachmentwithanaddresswithallotherlikeempowered.	
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SIGNATURE:  EF NELSON	Date: 4-4-04	DaytimePhone: 3055927340
SIGNATUREANDTYPEDORPRINTEDNAMEOFFSIGNINGOFFICERORDIRECTOR	Date	DaytimePhone#