

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744403

Entity Name: ELECTRICAL CONTRACTORS ASSOCIATION OF NORTHWEST FLORIDA, INC.**FILED**
Apr 13, 2022
Secretary of State
3222181965CC**Current Principal Place of Business:**906 WEST MAIN STREET
PENSACOLA, FL 32502**Current Mailing Address:**PO BOX 18363
PENSACOLA, FL 32523 US**FEI Number: 59-2072922****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KELSON, MICHELE B
906 WEST MAIN ST.
PENSACOLA, FL 32502 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title SECRETARY, TREASURER,
DIRECTOR
Name NELSON, CHARLES ERVIN
Address 6766 NICHOLS DRIVE
City-State-Zip: MILTON FL 32570

Title DIRECTOR
Name OLIVER, DUSTIN S
Address 1811 BLACKBIRD LANE
City-State-Zip: PENSACOLA FL 32534

Title D
Name MCCOMBS, MICHAEL
Address 5217 HIGHWAY 90
City-State-Zip: MILTON FL 32572

Title PRESIDENT, DIRECTOR
Name BELEW, JOHN B
Address 333 MASSACHUSETTS AVENUE
City-State-Zip: PENSACOLA FL 32505

Title VP, DIRECTOR
Name STURDIVANT, GARY D
Address 6455 HERMITAGE DRIVE
City-State-Zip: PENSACOLA FL 32504

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: CHARLES E. NELSON**TREASURER****04/13/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date