## **2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N00000004053

Entity Name: SOUTHWEST FLORIDA AREA LOCAL AMERICAN POSTAL

WORKERS UNION AFL-CIO, INC.

**Current Principal Place of Business:** 

11000 METRO PARKWAY SUITE 8

FT. MYERS, FL 33966

## **Current Mailing Address:**

11000 METRO PARKWAY SUITE 8

FT. MYERS, FL 33966 US

FEI Number: 59-1837980 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

ROBERTSON, JAMIE LYNN SOUTHWEST FLORIDA AREA LOCAL, INC. APWU 11000 METRO PARKWAY, SUITE #8 FT. MYERS, FL 33966 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: JAMIE LYNN ROBERTSON 09/27/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name WOOD, SAMUEL E Name CARINCI, DANNY

Address 11000 METRO PARKWAY, SUITE #8 Address 11000 METRO PARKWAY, SUITE #8

City-State-Zip: FORT MYERS FL 33966 City-State-Zip: FORT MYERS FL 33966

Title S/T Title CCD

Name ROBERTSON, JAMIE LYNN Name BAER, GRACE

Address 11000 METRO PARKWAY, SUITE #8 Address 11000 METRO PARKWAY, SUITE #8

City-State-Zip: FORT MYERS FL 33936 City-State-Zip: FORT MYERS FL 33966

Title EDIT Title MVSD

Name STRUNK, JEREMIAH Name FRACEK, JOE

Address 11000 METRO PARKWAY, SUITE #8 Address 11000 METRO PARWAY

SUITE 8

City-State-Zip: FORT MYERS FL 33966 City-State-Zip: FT. MYERS FL 33966

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: JAMIE L ROBERTSON

SECRETARY TREASURER 09/27/2023

FILED Sep 27, 2023

Secretary of State

1914274369CR