2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000466

Entity Name: SOUTHWEST FLORIDA UTILITY CONTRACTORS

ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 62207

FORT MYERS, FL 33906-2207

Current Mailing Address:

P. O. BOX 62207

FORT MYERS, FL 33906-2207 US

FEI Number: 65-0515643 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASON, RHONDA 2915 S. E. 5TH COURT CAPE CORAL, FL 33904 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: RHONDA CASON 01/23/2017

Electronic Signature of Registered Agent

Date

FILED Jan 23, 2017

Secretary of State

CC6449038537

Officer/Director Detail:

Title **OFFICER** Title **PRESIDENT**

Name HUNT BRANCH, AARON Name PENNER, MITCHELL Address 305 S.W. 3RD STREET Address 6001 SHIRLEY STREET City-State-Zip: CAPE CORAL FL 33991 City-State-Zip: NAPLES FL 34109

Title **TREASURER** Title **SECRETARY** Name STEWART, CHRIS Name HAAS, JERRY

Address **5771 COUNTRY LAKES DRIVE** Address 6515 PLANTATION PINES

BOULEVARD FORT MYERS FL 33905

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

Title DIRECTOR Title DIRECTOR

Name WENDORF, BRUCE Name GIBSON, FRANK

645 CHARLOTTE STREET Address 4600 CUMMINS COURT Address

City-State-Zip: PUNTA GORDA FL 33950 FORT MYERS FL 33905 City-State-Zip:

Title **EXECUTIVE DIRECTOR** Title **OFFICER**

CASON, RHONDA Name Name HOPKINS, NATHAN

Address P. O. BOX 62207 Address 600 DANLEY DRIVE, SUITE #1

FORT MYERS FL 33906-2207 City-State-Zip: City-State-Zip: FORT MYERS FL 33907

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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.

01/23/2017 **EXECUTIVE DIRECTOR** SIGNATURE: RHONDA CASON

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP

Name ANDREW, RALPH
Address 2511 PALM AVENUE

City-State-Zip: FORT MYERS FL 33916