

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2001 8:00 am
Secretary of State

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DO NOT WRITE IN THIS SPACE

DOCUMENT # 701472
1. Entity Name
TAMPA AREA SAFETY COUNCIL, INC.

Principal Place of Business	Mailing Address
1113 DR. M. L. KING JR. BLVD. EAST TAMPA FL 33603	1113 DR. M. L. KING JR. BLVD. EAST TAMPA FL 33603

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	59-0581682	Applied For
		Not Applicable
5. Certificate of Status Desired	☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HINSON, JOE B, JR 1113 E. DR. M.L. KING JR. BLVD. TAMPA FL 33603

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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	JOE B HINSON, JR., EXECUTIVE DIRECTOR	JANUARY 8, 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	JACJSON, JASON R
STREET ADDRESS	8202 HANGER LOOP DR #3
CITY-ST-ZIP	TAMPA FL 33603
TITLE	PE
NAME	FALCK, LAWRENCE J
STREET ADDRESS	5804 BRECKENRIDGE PKWY # A
CITY-ST-ZIP	TAMPA FL 33603
TITLE	IPP
NAME	SCHMIDT, NORMAN K
STREET ADDRESS	9215 N. FLORIDA AVE #105
CITY-ST-ZIP	TAMPA FL 33603
TITLE	T
NAME	STOKER, TIM
STREET ADDRESS	3601 N NEBRASKA AVE
CITY-ST-ZIP	TAMPA FL 33603
TITLE	SED
NAME	HINSON JR., JOE B
STREET ADDRESS	1113 E DR ML KING JR BLVD
CITY-ST-ZIP	TAMPA FL 33603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD
NAME	FALCK, LAWRENCE J
STREET ADDRESS	5807 BRECKENRIDGE PKWY #A
CITY-ST-ZIP	TAMPA, FL 33610-7015
TITLE	PE
NAME	RINALDI, LOUIS J
STREET ADDRESS	702 N FRANKLIN ST
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	IPP
NAME	JACKSON, JASON R
STREET ADDRESS	8202 HANGAR LOOP DR
CITY-ST-ZIP	MACDILL AFB, FL 33621-5502
TITLE	T
NAME	THOMPSON, ED
STREET ADDRESS	311 PARK PLACE BLVD #400
CITY-ST-ZIP	CLEARWATER, FL 33759
TITLE	SED
NAME	HINSON JR., JOE B
STREET ADDRESS	1113 E DR M L KING JR BLVD
CITY-ST-ZIP	TAMPA FL 33603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	JOE B HINSON, JR., EXE. DIR.	JAN. 8, 2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date
		Daytime Phone #

CR2E037 (10/00)