

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M87903

FILED  
Feb 16, 2011  
Secretary of State

Entity Name: AMERICAN SAFETY FIRST, INC.

**Current Principal Place of Business:**

%KATHLEENMARYSAYLOR  
1335 BENNETT DR., SUITE 129  
LONGWOOD, FL 327504966

**New Principal Place of Business:**

**Current Mailing Address:**

%KATHLEENMARYSAYLOR  
1335 BENNETT DR., SUITE 129  
LONGWOOD, FL 327504966

**New Mailing Address:**

FEI Number: 59-2899911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SAYLOR, KATHLEEN MARY  
1335 BENNETT DR., SUITE 129  
LONGWOOD, FL 327504966 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VPS  
Name: SAYLOR, DANIEL A.  
Address: 1335 BENNETT DR. SUITE 129  
City-St-Zip: LONGWOOD, FL 32750

Title: PRES  
Name: SAYLOR, KATHLEEN M  
Address: 1335 BENNETT DR. SUITE 129  
City-St-Zip: LONGWOOD, FL 32750

Title: DT  
Name: SAYLOR KATHLEEN MARY  
Address: 1335 BENNETT DRIVE  
City-St-Zip: LONGWOOD, FL 32750

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHLEEN M SAYLOR

PRES

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date