

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27947

1. Entity Name

FLORIDA SAFETY COUNCIL ASSOCIATION, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90159 006 ****61.25

Principal Place of Business
1714 EVANS AVE
FT. MYERS FL 33901
US

Mailing Address
1714 EVANS AVE
FT. MYERS FL 33901-2502
US

2. Principal Place of Business
Suite, Apt. #, etc.
700 S Military Trail

3. Mailing Address
700 S. Military Trail
Suite, Apt. #, etc.

City & State
W.P. B. FL

City & State
West Palm Bch., FL

City & State
W.P. B. FL

City & State
West Palm Bch., FL

Zip
33415

Country
US

Zip
33415

Country
US

4. FEI Number
59-1089435

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHILLIPS, DURELL B
1714 EVANS AVENUE
FT. MYERS FL 33901

Name
Fred Walsh

Street Address (P.O. Box Number is Not Acceptable)
427 North Primrose Avenue

Orlando, FL 32803

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  Fred Walsh 4/7/2000

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

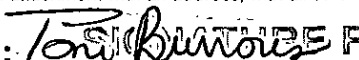
10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Delete
NAME	ROFFEY, DIANE	
STREET ADDRESS	1145 COURT ST	
CITY-ST-ZIP	CLEARWATER FL 34616	
TITLE	SD	☒ Delete
NAME	GIFFORD, DOUGLAS E	
STREET ADDRESS	2003-B APALACHEE PARKWAY	
CITY-ST-ZIP	TALLAHASSEE FL 32302	
TITLE	VTD	☒ Delete
NAME	PHILLIPS, DURELL B	
STREET ADDRESS	1714 EVANS AVE	
CITY-ST-ZIP	FORT MYERS FL 33901	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☒ Addition
NAME	Gifford, Douglas E.	
STREET ADDRESS	PO Box 1715	
CITY-ST-ZIP	Tallahassee, FL 32302	
TITLE	SD	☐ Change ☒ Addition
NAME	Fred Walsh	
STREET ADDRESS	427 N Primrose Avenue	
CITY-ST-ZIP	Orlando, FL 32803	
TITLE	TVPD	☐ Change ☒ Addition
NAME	Toni Burrows	
STREET ADDRESS	770 S. Military Trail	
CITY-ST-ZIP	West Palm Bch., FL 33415	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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:  RE Toni Burrows 4/7/2000 (561)689-4733 Ex 16

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)