

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27947

FILED
Jan 22, 2009
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF SAFETY COUNCILS, INC.

Current Principal Place of Business:

3710 NW 51ST STREET
SUITE A
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

3710 NW 51ST STREET
SUITE A
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 36-4460790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWER, ROGER J
3710 NW 51ST STREET
SUITE A
GAINESVILLE, FL 32606 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: DD () Delete
Name: BROWER, ROGER J MR
Address: 3710 N.W. 51ST STREET, SUITE A
City-St-Zip: GAINESVILLE, FL 32606

Title: TD () Delete
Name: BURROWS, TONI MS
Address: 770 SOUTH MILITARY TRAIL
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SD () Delete
Name: HOLLEY, JOEL R MR
Address: 1725 ART MUSEUM DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD () Delete
Name: GIFFORD, DOUG MR
Address: 2003B APALACHEE PKWY
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROGER J BROWER

DD

01/22/2009

Electronic Signature of Signing Officer or Director

Date