2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000047182

1. Entity Name AMERICAN SAFETY MOVERS, INC.



Principal Place of Business

Mailing Address

2011 LISENBY AVE. PANAMA CITY, FL 32405 2011 LISENBY AVE. PANAMA CITY, FL 32405 FILED Jan 11, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01082007 No Chg-P

CR2E034 (11/05)

4. FEI Number 74-3088825 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

COLEMAN, DOUGLAS 2011 LISENBY AVE. PANAMA CITY, FL 32405

SIGNATURE: The

DO NOT WRITE IN THIS SPACE

7005 WAL 80

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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLEMAN, MELANIE S 2811 BRIARCLIFF ROAD DOTHAN, AL 36303				U00000532576 01/11/07-80037-008 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COLEMAN, PATRICK B 2811 BRIARCLIFF ROAD DOTHAN, AL 36303				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
THEE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with pall other like empowered.					