

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112909

FILED
Mar 31, 2009
Secretary of State

Entity Name: FLORIDA SAFETY CONTRACTORS, INC.

Current Principal Place of Business:

11702 N. US HWY 301
THONOTOSASSA, FL 33592

New Principal Place of Business:

11825 JACKSON ROAD
THONOTOSASSA, FL 33592

Current Mailing Address:

PO BOX 16546
TEMPLE TERRACE, FL 33617

New Mailing Address:

PO BOX 16628
TEMPLE TERRACE, FL 33687

FEI Number: 57-1191566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REICHART, MICHAEL K
1817 BELLA CASA COURT
TAMPA, FL 33618 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REICHART, MICHAEL K
Address: 1817 BELLA CASA COURT
City-St-Zip: TAMPA, FL 33618

Title: VST () Delete
Name: REICHART, ELAINE
Address: 1817 BELLA CASA COURT
City-St-Zip: TAMPA, FL 33618

Title: VM () Delete
Name: PERSAUD, PREM
Address: 16316 BONNEVILLE DR
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: LOUKS, LINDA
Address: 1703 CURRY RD
City-St-Zip: LUTZ, FL 33549

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

SIGNATURE: MICHAEL K REICHART

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date