

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000002420

**Entity Name:** FLORIDA MINE SAFETY & HEALTH ASSOCIATION, INC.**Current Principal Place of Business:**3034 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312**Current Mailing Address:**3034 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 US**FEI Number:** 36-4750771**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MADIGAN LAW FIRM, P.L.  
ATTN: TERRELL C MADIGAN  
215 EAST THARPE STREET  
TALLAHASSEE, FL 32303 US*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

**Officer/Director Detail :**

Title PD  
Name CORLEY, KEN  
Address 1727 VIRGINIA COURT  
City-State-Zip: LAKELAND FL 33813

Title VD  
Name JOHNSON, DAVID  
Address 3904 LEVINS ROAD  
City-State-Zip: MULBERRY FL 33860

Title SD  
Name CLARK, NANETTE  
Address 3034 LAKESHORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

Title TD  
Name HART, W. BEN  
Address 3034 LAKESHORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name OOLEY, NOEL R.  
Address 3034 LAKESHORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name BUTLER, WILLIAM  
Address 3034 LAKESHORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name TEETS, WILLIAM  
Address 3034 LAKESHORE DRIVE  
City-State-Zip: TALLAHASSEE FL 32312

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:** W. BEN HART

T/D

04/04/2019

Electronic Signature of Signing Officer/Director Detail

Date