

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 380584 ✓

1. Corporation Name

SAFETY EQUIPMENT COMPANY, INC.

Principal Place of Business

6507 N HARNEY ROAD
TAMPA FL 33610-9595

Mailing Address

6507 N HARNEY ROAD
TAMPA FL 33610-9595

FILED
Jul 22, 1999 8:00 am
Secretary of State

07-22-1999 90019 039 ***550.00

594133 - 90019 - 39



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/16/1971

4. FEI Number

59-2713508

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

9. Name and Address of Current Registered Agent

CRANNELL, DAVID J.
6507 N. HARNEY ROAD
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TO ☐ DELETE
NAME WARBRITTON, DAVID S.
STREET ADDRESS 6507 N HARNEY RD
CITY-ST-ZIP TAMPA FL

TITLE PD ☐ DELETE
NAME CRANNELL, DAVID J
STREET ADDRESS 6507 N HARNEY RD
CITY-ST-ZIP TAMPA FL

TITLE SVD ☐ DELETE
NAME CRANNELL, RICHARD H.
STREET ADDRESS 6507 N HARNEY RD
CITY-ST-ZIP TAMPA FL

TITLE V ☒ DELETE
NAME BROWN, BILL
STREET ADDRESS 6507 N HARNEY RD
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHIEF FINANCIAL OFFICER ☐ Change ☒ Addition
1.2 NAME L. STACY BRANSKY
1.3 STREET ADDRESS 6507 N HARNEY RD.
1.4 CITY-ST-ZIP TAMPA FL 33610

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/7/99 813-628-4527x231

CR2E034 (5/99)