

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702764

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: UNITED SAFETY COUNCIL, INC.

## Current Principal Place of Business:

427 N PRIMROSE DR  
ORLANDO, FL 32803 US

## New Principal Place of Business:

## Current Mailing Address:

427 N PRIMROSE DR  
ORLANDO, FL 32803 US

## New Mailing Address:

FEI Number: 59-1358237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GUILMET, THOMAS P  
427 N PRIMROSE DR  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

GUILMET, THOMAS P EXEC DIR  
427 N PRIMROSE DR  
ORLANDO, FL 32803 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: /THOMAS P. GUILMET/

04/14/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REID, ROY W PRES.  
Address: PO BOX 3186  
City-St-Zip: ORLANDO, FL 32802 US

Title: VD ( ) Delete  
Name: MEADE, JIM V PRES.  
Address: 324 W. GORE ST.  
City-St-Zip: ORLANDO, FL 32806 US

Title: TSD ( ) Delete  
Name: WILES, STEVE TREAS.  
Address: 7306 WOODKNOT CT.  
City-St-Zip: ORLANDO, FL 32835 US

Title: D ( ) Delete  
Name: GUILMET, THOMAS P EXEC DIR  
Address: 427 N PRIMROSE DRIVE  
City-St-Zip: ORLANDO, FL 32803 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MEADE, JIM PRES.  
Address: 324 W GORE ST.  
City-St-Zip: ORLANDO, FL 32806 US

Title: VD (X) Change ( ) Addition  
Name: GROVER, KEN V PRES.  
Address: 6990 LAKE ELLENOR DR  
City-St-Zip: ORLANDO, FL 32809 US

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: /THOMAS P. GUILMET/

D

04/14/2008

Electronic Signature of Signing Officer or Director

Date