

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706553

1. Entity Name

NORTH CENTRAL FLORIDA SAFETY COUNCIL, INCORPORAT

Principal Place of Business

3710 N.W. 51ST ST., SUITE A
GAINESVILLE FL 32606

Mailing Address

3710 N.W. 51ST ST., SUITE A
GAINESVILLE FL 32606

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BROWER, ROGER J
3710 N.W. 51ST ST
GAINESVILLE FL 32606

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PPD TRULUCK, STEVE 1600 S.W. ARCHER RD GAINESVILLE FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD PAINTER, JERRY 2425 NE 19TH DR GAINESVILLE FL 32609 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD KEETER, BOB 5024 NW 27TH CRT GAINESVILLE FL 32606 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD ELMORE, BOB 620 E. UNIVERSITY AVE GAINESVILLE FL 32601 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PPD KIESZEK, LARRY 222 NE 1ST STREET GAINESVILLE FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD PAVLIK, STEVE 250 SW 36TH TER GAINESVILLE FL 32607 | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD STEVE HUFFSTUTLER 1105 SW 7TH ROAD OCALA, FL 34474 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

ROGER J. BROWER 04/17/01 352/377-2566

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90374 026 *****70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachments

**North Central Florida Safety Council
2001/02 Board of Directors**

706553
748575

Officers

President

Jerry Painter

President
Painter Masonry, Inc.
2425 NE 19th Drive
Phone: 378-7511
Fax: 378-9330

Past President

Steve Truluck

Director, Safety & Security
Shands Healthcare
Box 100307
Gainesville, Florida 32610
Phone: 265-0028
Fax 265-0305

Vice President Occupational Safety

Steve Pavlik

President
Crom Corporation
250 SW 36th Terrace
Gainesville, Florida 32607
Phone: 372-3436
Fax: 372-6209

Vice President Community Safety

Bob Keeter

Attorney
McConaughay, Duffy, Coonrod, Pope
& Weaver, P.A.
5024 NW 27th Court
Gainesville, Florida 32606
Phone: 378-4422
Fax: 378-7826

Secretary/Treasurer

Steve Huffstutler

Risk Management
Marion County School Board
1105 SW 7th Road Ocala, FL 34474
Phone: 620-7662
Fax: 620-7646

Alfakhmanb

Directors

706583

748575

At Large Representative

Dr. Robert Ashley

Physician
Family Practice
6800 NW 9th Boulevard
Gainesville, Florida 32605
Phone: 331-3300
Fax: 331-2637

At Large Representative

Richard Budnar

Senior Risk Consultant
Staff Leasing Corporation
4404 NW 36th Avenue
Gainesville, Florida 32606
Phone: 377-5002
Fax:

At Large Representative

Bob Elmore

Property Officer
Alachua County School Board
620 E University Avenue
Gainesville, Florida 32601
Phone: 955-7592
Fax: 955-6700

At Large Representative

John Hudson

Principal Specialist
General Physics Corporation
P.O. Box 357520
Gainesville, Florida 32635
Phone: 321-267-5253
Fax: 376-5936

At Large Representative

Katherine Pierce

Senior Vice President/CFO
Environmental Consulting &
Technology
3701 NW 98th Street
Gainesville, Florida 32606
Phone: 332-0444
Fax: 332-6733