

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736226

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA SCHOOL LABOR RELATIONS SERVICE, INC.

**Current Principal Place of Business:**

203 SO MONROE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

203 S. MONROE STREET  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

203 SO MONROE  
TALLAHASSEE, FL 32301

**New Mailing Address:**

203 S. MONROE STREET  
TALLAHASSEE, FL 32301

**FEI Number:** 59-1796844

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SCHMIDT, MAX  
203 SO MONROE ST.  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

SCHMIDT, MAX  
203 S. MONROE ST.  
TALLAHASSEE, FL 32301 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:

03/31/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: SCHMIDT, MAX  
Address: 203 S MONROE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: CD  
Name: HIMMEL, SANDRA  
Address: 1007 WEST MAIN STREET  
City-St-Zip: INVERNESS, FL 34450

Title: VCD  
Name: HIGHTOWER, PATTY  
Address: 215 WEST GARDEN STREET  
City-St-Zip: PENSACOLA, FL 32502

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

SIGNATURE: MAX SCHMIDT

SD

03/31/2011

Electronic Signature of Signing Officer or Director

Date