

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

0088289

DOCUMENT # 813977

1. Entity Name

NATIONAL CHILD SAFETY COUNCIL

04-02-2001 90310 028 ****70.00

Principal Place of Business

Mailing Address

4065 PAGE AVE.
 JACKSON MI 49204

P. O. BOX 1368
 JACKSON MI 49204

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

38-6035290

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME WILKINSON KC
 STREET ADDRESS 4065 PAGE AVE P O BOX 1368 NA
 CITY-ST-ZIP JACKSON MI

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE STD ☐ Delete
 NAME ELLIOTT, ALVIN E
 STREET ADDRESS 502 HARWOOD
 CITY-ST-ZIP JACKSON MI

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME TAYLOR, JERRY L
 STREET ADDRESS 1501 BADGLEY RD.
 CITY-ST-ZIP JACKSON MI

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME SCHEID, STEPHEN L
 STREET ADDRESS 2712 VERONICA DR
 CITY-ST-ZIP LOUISVILLE KY 20222

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME EISELE, JOSEPH S
 STREET ADDRESS 40 LANE 110A- BIG OTTER LAKE
 CITY-ST-ZIP FREEMONT IN 46736

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME ZIETLOW, MARK H
 STREET ADDRESS 321 SETTLERS RD.
 CITY-ST-ZIP HOLLAND MI

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: By **SIGNATURE REQUIRED** Jerry L. Taylor, VP 4/6/01 517-764-6070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)