2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 03, 2004 8:00 am Secretary of State

1. Entity Name NATIONAL SAFETY COUNCIL					į	08-03-2004	4 90001 014 ****(51.23
1121 SPRING LAKE DRIVE 1121 S			a Address SPRING LAKE DRIVE A, IL 60143-3201		(((1)	fðill Talli agin geni fð	540662	
Principal Place of Business 3. Mailin		3. Mailing Address	ling Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		07022004	Chg-NP	CR2E037 (10/03)	
City & State		City & State	City & State		4. FEI Numbe 36-2167		<u> </u>	pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desired	S8.75 Ad Fee Require	
	6. Name and Address of Curren	Registered Agent			7. Name and	Address of New F	Registered Agent	
ANTON, C			Narfi Stree	1) UO	P.O. Box Numbe	VISON er is Not Acceptabl	e)	
5401 KIRKMAN ROAD, STE. 200 AMSOUTH BUILDING ORLANDO, FL 32819			54 .0.	OLK!	ckman	Koad	"Steado	
			City	Vlai	715	maina	FL Zip Coo	<u></u>
8. The above the obligation	named entity submits this statement f tions of registered agent.	or the purpose of changir	ig its registered offici	e or register	ed agent, or both	h, in the State of Fl	orida. I am familiar with	, and accept
SIGNATURE	Robo Hulls Signature, typed or printed name of registered agen	ON AND AND AND AND AND AND AND AND AND AN		. v 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7/28/04	· ·
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e d'ass	Filing Fee is \$61.25 ue by September 8, 2004	9. Election Trust Fo	Campaign Financin	g .	\$5.00 May Be	e N		itate
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THE CO.

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 it 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR EDWARD M. RYLKO

Jucy 28, 2004

630-775-2249