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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G09210 (7)

1. Corporation Name
TRANSPORTATION SAFETY CONTRACTORS, INC.



Principal Place of Business
7750 PROFESSIONAL PL
TAMPA FL 33637

Mailing Address
7750 PROFESSIONAL PL
TAMPA FL 33637-6742

3. Date Incorporated or Qualified
11/22/1982

3a. Date of Last Report
05/01/1996

2. Principal Place of Business
21 Suite, Apt. #, etc.

2a. Mailing Address
26 Suite, Apt. #, etc.

4. FEI Number
59-2234741

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

23 Zip Country
25

28 Zip Country
29 30

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POWERS, JOSEPH P
7750 PROFESSIONAL PLACE
TAMPA FL 33637

81 Name
James B. Hall

82 Street Address (P.O. Box Number is Not Acceptable)
7750 Professional Place

83

84 City
Tampa

85 Zip Code
FL 33637

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *James B. Hall* DATE 4/18/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD	<input type="checkbox"/> DELETE
NAME	MERCURIO, WILLIAM J	
STREET ADDRESS	7750 PROFESSIONAL PLACE	
CITY-ST-ZIP	TAMPA FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MAREK, JAMES	
STREET ADDRESS	7750 PROFESSIONAL PLACE	
CITY-ST-ZIP	TAMPA FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DONATELLI, JOHN M	
STREET ADDRESS	1840 POLK ST., #1	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	VPS	<input checked="" type="checkbox"/> DELETE
NAME	SMITH, PEGGY	
STREET ADDRESS	1402 OAKWOOD LANE EAST	
CITY-ST-ZIP	PLANT CITY FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	ANTHONY, CARL	
STREET ADDRESS	103 FOXWOOD DRIVE	
CITY-ST-ZIP	BRANDON FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	POWERS, JOSEPH P	
STREET ADDRESS	7750 PROFESSIONAL PLACE	
CITY-ST-ZIP	TAMPA FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	James Barry Hall
2.3 STREET ADDRESS	7750 Professional Place
2.4 CITY-ST-ZIP	Tampa, Florida 33637
3.1 TITLE	VP/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Gerry W. Hall
3.3 STREET ADDRESS	7750 Professional Place
3.4 CITY-ST-ZIP	Tampa, Florida 33637
4.1 TITLE	S/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Daniel L. Osborne
4.3 STREET ADDRESS	7750 Professional Place
4.4 CITY-ST-ZIP	Tampa, Florida 33637
5.1 TITLE	AT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Rosemarie Mulholland
5.3 STREET ADDRESS	7750 Professional Place
5.4 CITY-ST-ZIP	Tampa, Florida 33637
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James B. Hall* SIGNATURE REQUIRED

4/18/97

(813) 985-0003

Date

Daytime Phone #

CR2E034 (9/96)