609210

Requester's Name

Transportation Safety Contractors, Inc.

7750 Professional Place Tampa, FL 33637

CR2E031(7/97)

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Office Use Only

Examiner's Initials

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
Not for Profit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent Dissolution/Withdrawal	
Domestication Other	Merger	
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OTHER FILINGS	REGISTRATION/QUALIFIC	ATION
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Annual Report Fictitious Name	Foreign Limited Partnership	
Fictitious Name	Reinstatement	
	Trademark	
	Other	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Transportation Safety Contractors, Inc.	
2. The mailing address of the corporation: 7750 Professional Place	
Tampa, FL 33637	
3. Date of incorporation/qualification: 11/22/82 Document number: G 09210	- '
4. The name and address of the current registered agent and office:	_
Rick Stephens	• •
92 Lake Wire	
Tokolond IPI 22015	
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)	
(P. O. Box Not Acceptable)	
Andrea Jennings	
2000 East Edgewood Drive, Suite 106B	-11
Lakeland, FL 33803	
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.	
authorized by the board.	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
Lance McNeill, President	
(Printed or typed name and title)	٠.
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.	
Andrea (Signature of Registered Agent) 9/2//01 (Signature of Registered Agent)	
If signing on behalf of an entity:	
n/a (Typed or Printed Name) (Consolte)	_
(Typed of Printed Name) (Capacity)	
* * * FILING FEE: \$35.00 * * *	
CR2E045(9/00)	

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DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314