

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90021 040 ***158.75

DOCUMENT # G09210

1. Entity Name

TRANSPORTATION SAFETY CONTRACTORS, INC.

Principal Place of Business

**7750 PROFESSIONAL PLACE
TAMPA FL 33637
US**

Mailing Address

**7750 PROFESSIONAL PLACE
TAMPA FL 33637
US**

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

59-2234741

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

JENNINGS, ANDREA

2000 E. EDGEWOOD DRIVE

SUITE 106B

LAKELAND FL 33809

Name

Street Address (P.O. Box Number is Not Acceptable)

135 HORIZON COURT

City

LAKELAND FL

FL

Zip Code

33813

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

Andrea S Jennings

2/20/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PDC**
STREET ADDRESS **MCNEIL, LANCE**
CITY-ST-ZIP **2000 EAST EDGEWOOD DRIVE, SUITE 106B**
LAKELAND FL 33809

TITLE ☒ Change ☐ Addition
NAME **LANCE MCNEIL**
STREET ADDRESS **135 HORIZON COURT**
CITY-ST-ZIP **LAKELAND FLORIDA 33813**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **REICHART, KEVIN M**
CITY-ST-ZIP **7750 PROFESSIONAL PLACE**
TAMPA FL 33637

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

TITLE ☒ Delete
NAME **T**
STREET ADDRESS **O'KEEFFEE, MICHAEL**
CITY-ST-ZIP **2000 EAST EDGEWOOD DRIVE, SUITE 106B**
LAKELAND FL 33809

TITLE ☒ Change ☐ Addition
NAME **135 HORIZON COURT**
STREET ADDRESS **LAKELAND FL 33813**
CITY-ST-ZIP

TITLE ☒ Delete
NAME **S/V**
STREET ADDRESS **NEELY, JERRY**
CITY-ST-ZIP **7750 PROFESSIONAL PLACE**
TAMPA FL 33637

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **Steven E. Palmer**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Vice President / Assistant Secretary**
STREET ADDRESS **Steven E. Palmer**
CITY-ST-ZIP **135 Horizon Court**
Lakeland, FL 33813

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven E. Palmer

2/20/02

Date

863.607.9988

Daytime Phone #

CR2E034 (9/01)