## 2002 UNIFORM BUSINESS REPORT (UBR)

Tickey 1187 SIGNATURE AND TYPED OF PRINTED NAME OF SIGN

#### May 01, 2002 8:00 am Secretary of State DOCUMENT # N0000007809 1. Entity Name 03-29-2002 91221 025 \*\*\*\*70.00 FLORIDA PARTNERSHIP FOR SAFETY AND HEALTH, INC. Principal Place of Business Mailing Address 26738 PO BOX 720413 PO BOX 720413 ORLANDO FL 32872-0413 ORLANDO FL 32872-0413 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3686152 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LEE. TERRY M PH.D. 7333 MARSEILLE CIRCLE ORLANDO FL 32822 City 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) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete ROBERT NESBIT пль ☐ Change <u>(9</u> NAME yates, Mike NAME 211 CAMBRIDGE DRIVE STREET ADDRESS 5137 GULFPORT BLVD STREET ADDRESS **CR2E037** ORLANDO, FloriDA 32779 CITY-ST-ZIP GULFPORT FL 33707 CITY-ST-ZIP me ☐ Delete THE MAGAZINE, CHUCK NAME NAME STREET ADDRESS 100 EAST BOYNTON BEACH STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL 33425-0130 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME VESPI, CHARLENE HAMES STREET ADDRESS 15350 AMBERLY DRIVE APT 921 STREET ADDRESS CITY-ST-ZIP TAMPA FL 33647 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MCGINN, STEPHEN NAME STREET ADDRESS 2353 SUNDERLAND ROAD STREET ACCRESS CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE . Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

**FILED** 

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Attachment # NOCOCOCO 7809
TITLES OF OFFICERS/DIRECTORS

As per your request, the names and titles of the officers/directors of the Florida Partnership for Safety and Health, Inc.

## **President**

Charlene Vespi 15350 Amberly Drive Apt. #921 Tampa, Florida 33647

## **Vice President**

Chuck Magazine 100 E. Boynton Beach Boulevard Boynton Beach, Florida 33425-0310

#### Director

Stephen McGinn 2353 Sunderland Road Maitland, Florida 32751

# **Board Chairman**

Robert Nesbit 211 Cambridge Drive Orlando, Florida 32779