

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 19, 2003 8:00 am
Secretary of State

05-23-2003 90145 001 ****61.25

DOCUMENT # N00000007809			
1. Entity Name FLORIDA PARTNERSHIP FOR SAFETY AND HEALTH, INC.			
Principal Place of Business PO BOX 720113 ORLANDO FL 32872-0113		Mailing Address PO BOX 720113 ORLANDO FL 32872-0113	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent Deceased LEE TERRY MCARD 7000 MARSHALL CIRCLE ORLANDO FL 32802 Charlene Vespi 15350 Amberly Dr. Apt 724 Tampa, FL 33647		7. Name and Address of New Registered Agent Name Charlene Vespi Street Address (P.O. Box Number is Not Acceptable) 15350 Amberly Dr. Apt. 724 City Tampa FL Zip Code 33647	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>Charlene Vespi</u>		DATE <u>05/20/03</u>	
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NESBIT, ROBERT 211 CAMBRIDGE DRIVE ORLANDO FL 32779	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAGAZINE CHUCK 100 EAST BOYNTON BEACH BOYNTON BEACH FL 33425-0130	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Director VESPI, CHARLENE 15350 AMBERLY DRIVE APT 724 TAMPA FL 33647	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, STEPHEN 1300 SUNSETLAND ROAD ORLANDO FL 32833	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cynthia Watts Secretary 14535 Bruce B. Downs, Tampa, FL 33613	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
SIGNATURE: <u>Charlene Vespi</u>		Date <u>05/20/03</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

59056822

☐ CHECK HERE IF MAKING CHANGES

CR2037 (10/02)

Attachment



Florida Partnership for Safety and Health, Inc.

P.O. Box 46182
Tampa, FL 33647

55056822

Florida Department of State

Subject: Florida Partnership for Safety and Health, Inc.

Reference Number: N00000007809

Enclosed is the 2003 Not for Profit Corporation Uniform Business Report.

As you can see Robert Nesbit and Charlene Vespi are listed as Director and Cynthia Watts as a trustee.

If there is any concern with this report, please advise.

Thank you,

Charlene Vespi
Charlene Vespi