## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001411

Entity Name: FLORIDA SAFETY COUNCIL, INC.

FILED Apr 28, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

219 SE BAYA DRIVE 427 NORTH PRIMROSE DRIVE LAKE CITY, FL 32025 ORLANDO, FL 32803

**Current Mailing Address: New Mailing Address:** 

360 SE MONROE ST 427 NORTH PRIMROSE DRIVE LAKE CITY, FL 32025 ORLANDO, FL 32803 US

FEI Number: 59-1358237 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SKINNER, SHERRILL N GUILMET, THOMAS P DIR 360 SE MÓNROE ST 427 NORTH PRIMROSE DRIVE LAKE CITY, FL 32025 US ORLANDO, FL 32803

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: /THOMAS P. GUILMET/ 04/28/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP (X) Change ( ) Addition () Delete SKINNER, SHERRILL N WILLIAMS, MELVIN PRES. Name: 360 SE MONROE ST Address: 1100 JOHN GLENN BLVD Address: LAKE CITY, FL 32025 City-St-Zip: City-St-Zip: TITUSVILLE, FL 32780 US

Title: DTS () Delete Title: (X) Change ( ) Addition

DOUGLASS, ANN Name: ABER, WREN V PRES Name: Address: 360 SE MONROE ST Address: 2016 WOODY DRIVE City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: WINDERMERE, FL 34786 US

Title: DV () Delete Title: TSD (X) Change ( ) Addition DOUGLASS, BEN SHAW, DAVE TREAS. Name: Name:

360 SE MONROE ST Address: Address: 1255 GLEN ROYAL TERRACE City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: DELAND, FL 32720 US

Title: () Delete Title: ( ) Change (X) Addition Name: Name: GUILMET, THOMAS P DIR 427 NORTH PRIMROSE DRIVE Address: Address: ORLANDO, FL 32803 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: /THOMAS P. GUILMET/ DIR 04/28/2005