

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000002772

FILED
Oct 12, 2009
Secretary of State

Entity Name: S.A.F.E. SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

BIGELOW DR
HOLIDAY, FL 34691

New Principal Place of Business:

18714 CRAIG LOOP
HUDSON, FL 34667

Current Mailing Address:

P.O. BOX 1303
ELFERS, FL 34680

New Mailing Address:

FEI Number: 02-0591766 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROSE, TARA L
BIGELOW DR
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

ROSE, TARA L
LANDOVER BLVD
SPRING HILL, FL 34608 US

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: TARA L ROSE

10/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: ROSE, TARA L
Address: BIGELOW DR
City-St-Zip: HOLIDAY, FL 34691

Title: D () Delete
Name: ROSE, DANNY O
Address: BIGELOW DR
City-St-Zip: HOLIDAY, FL 34691

Title: D () Delete
Name: AVILES, KIM M
Address: GROVELAND RD
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: BURGESS-CHIN, HEATHER
Address: UNION ST
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: CHIN, WILLIAM
Address: UNION ST
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: JOHNSON, STACIE
Address: STONEMAN LOOP
City-St-Zip: LAND O LAKES, FL 34638

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: ROSE, TARA L
Address: LANDOVER BLVD
City-St-Zip: SPRING HILL, FL 34667

Title: D (X) Change () Addition
Name: ROSE, DANNY O
Address: LANDOVER BLVD
City-St-Zip: SPRING HILL, FL 34667

Title: D (X) Change () Addition
Name: AVILES, KIM M
Address: HAWTHORNE DR
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PIRNAT, JEAN K
Address: GROVELAND RD
City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: TARA L ROSE

MD

10/12/2009

Electronic Signature of Signing Officer or Director

Date