

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002984

FILED
Feb 06, 2011
Secretary of State

Entity Name: WEST CENTRAL FLORIDA DISASTER SERVICES, INC.

Current Principal Place of Business:

6851 - 13TH AVE. N.
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

6851 - 13TH AVE. N.
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 20-4507312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DANIEL W
6851 - 13TH AVENUE NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JOHNSON, DANIEL W
Address: 6851 13TH AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VP
Name: KIRLEY, SCOTT
Address: 12 HARBOR WOODS DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SEC
Name: CRABBE, KAREN S
Address: 1334 EASTFIELD
City-St-Zip: CLEARWATER, FL 33764

Title: DIR
Name: WRONA, NORM
Address: 5924 CAPE LOOP
City-St-Zip: LAND O LAKES, FL 34639

Title: DIR
Name: STEVENSON, TROY
Address: 7909 CITRUS BLOSSOM DR.
City-St-Zip: TAMPA, FL 34637

I hereby 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 all other like empowered.

SIGNATURE: DANIEL W. JOHNSON

P

02/06/2011

Electronic Signature of Signing Officer or Director

Date