2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005206

FILED May 03, 2007 Secretary of State

Entity Name: COUNCIL ON SAFETY AND HEALTH COMMUNITY INITIATIVES, INC.

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

4171 WEST HILLSBORO BOULEVARD 4171 WEST HILLSBORO BOULEVARD

COCONUT CREEK, FL 33073 SUITE 12

COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

4171 WEST HILLSBORO BOULEVARD 4171 WEST HILLSBORO BOULEVARD

SUITE 5 SUITE 12

COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073

FEI Number: 20-4876386 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: Name and Address of New Registered Agent:

GOLDBERG, ADAM S 1792 BELL TOWER LANE WESTON, FL 33326 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: S (X) Change () Addition Name: RHOADS, RICHARD Name: RHOADS, RICHARD

Address: 4171 WEST HILLSBORO BOULEVARD SUITE 5 Address: 4171 WEST HILLSBORO BOULEVARD SUITE 12

City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete Title: P (X) Change () Addition

Name: RYAN, JAY Name: RYAN, JAY

Address: 4171 WEST HILLSBORO BOULEVARD SUITE 5 Address: 4171 WEST HILLSBORO BOULEVARD SUITE 12

City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete Title: D (X) Change () Addition Name: DEARING, RON JR Name: DEARING, RON JR

Address: 4171 WEST HILLSBORO BOULEVARD SUITE 5 Address: 4171 WEST HILLSBORO BOULEVARD SUITE 12

City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip: COCONUT CREEK, FL 33073

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: RONALD DEARING, JR. D 05/03/2007