

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006545

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** THE FLORIDA COUNCIL ON HIGHWAY SAFETY, INCORPORATED

**Current Principal Place of Business:**

149 NORTH KENTUCKY AVE  
UMATILLA, FL 32784

**New Principal Place of Business:**

**Current Mailing Address:**

PO DRAWER 2465  
UMATILLA, FL 32784

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HATFIELD, MICHAEL H  
149 NORTH KENTUCKY AVE  
UMATILLA, FL 32784 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: DP  
Name: HATFIELD, MICHAEL H  
Address: PO DRAWER 2465  
City-St-Zip: UMATILLA, FL 32784

Title: D  
Name: BAXLEY, JAMES R  
Address: PO DRAWER 2465  
City-St-Zip: UMATILLA, FL 32784

Title: D  
Name: CADWELL, WELTON G  
Address: PO DRAWER 2465  
City-St-Zip: UMATILLA, FL 32784

Title: D  
Name: BARFIELD, JASON R  
Address: 4853 COUNTY ROAD 116  
City-St-Zip: WILDWOOD, FL 34785

Title: DST  
Name: HATFIELD, LINDA C  
Address: PO DRAWER 2465  
City-St-Zip: UMATILLA, FL 32784

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: MICHAEL H HATFIELD

DP

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date