

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011719

FILED
Feb 07, 2011
Secretary of State

Entity Name: FLORIDA MUNICIPAL ASSOCIATION FOR SAFETY AND HEALTH, INC.

Current Principal Place of Business:

125 COLONIAL DRIVE EAST,
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

125 COLONIAL DRIVE EAST,
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 75-3223562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLASER, SCOTT J CSP
125 EAST COLONIAL DRIVE
ORLANDO, FL 32801 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: PPRE
Name: LITTON, DARLA
Address: 125 COLONIAL DRIVE EAST
City-St-Zip: ORLANDO, FL 32801

Title: PRES
Name: THOMAS, LE
Address: 125 COLONIAL DRIVE, EAST
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: KOPER, RON
Address: 125 COLONIAL DRIVE, EAST
City-St-Zip: ORLANDO, FL 32801

Title: TREA
Name: HAYES, DONNA
Address: 125 COLONIAL DRIVE, EAST
City-St-Zip: ORLANDO, FL 32801

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: SCOTT J. BLASER

EX D

02/07/2011

Electronic Signature of Signing Officer or Director

Date