

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008341

FILED
May 13, 2011
Secretary of State

Entity Name: WORKPLACE INJURY PREVENTION SERVICES INC.

Current Principal Place of Business:

34838 ARBOR GREEN PL.
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

34838 ARBOR GREEN PL.
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: 27-0651548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VESPI, CHARLENE
34838 ARBOR GREEN PL.
ZEPHYRHILLS, FL 33541 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: PTD
Name: SITTERLY, MARK
Address: 171 HILLSIDE DRIVE
City-St-Zip: HILTON, NY 14468

Title: VD
Name: NESBIT, ROBERT
Address: 1928 RENSSELAER DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S
Name: VESPI, CHARLENE
Address: 34838 ARBOR GREEN PL.
City-St-Zip: ZEPHYRHILLS, FL 33541

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: CHARLENE VESPI

S

05/13/2011

Electronic Signature of Signing Officer or Director

Date