

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12112

FILED
Apr 09, 2012
Secretary of State

Entity Name: AMERICAN PRODUCTION AND INVENTORY CONTROL SOCIETY, FLORIDA WEST COAST CHAPTER, INC.

Current Principal Place of Business:

514 HUMPHRIES RD
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 25152
TAMPA, FL 33622

New Mailing Address:

FEI Number: 59-2243338 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GERALD, KILTY L
514 HUMPHRIES RD
SAFETY HARBOR, FL 34695 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: SECT
Name: CHIASSON, KEITH J MR
Address: 1314 WICKFORD ST.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: P
Name: CHRISTIANO, PETER J MR
Address: 500 MAIN STREET
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: VP
Name: CONLEY, CATHY A MS
Address: 4920 W CYPRESS ST STE 110
City-St-Zip: TAMPA, FL 33607 US

Title: VP
Name: WOLF, ROBERT MR
Address: 5051 CROSS POINTE DR
City-St-Zip: OLDSMAR, FL 34677

Title: PRES
Name: MOORE, JAMES MR
Address: 4920 WEST CYPRESS ST., STE 110
City-St-Zip: TAMPA, FL 33607

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: ROBERT WOLF

VP

04/09/2012

Electronic Signature of Signing Officer or Director

Date