

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29562

FILED
Mar 25, 2009
Secretary of State

Entity Name: AMERICAN TRAFFIC SAFETY SERVICES ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

910 CHARLES STREET
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

910 CHARLES STREET
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 65-0142025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAUSNIGHT, PHILLIP J
910 CHARLES STREET
LONGWOOD, FL 32750 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: PD () Delete
Name: MITCHELL, STEVE
Address: 129 ROBIN RD
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: VPD () Delete
Name: WALLS, SCOTT
Address: 4603 REECE RD
City-St-Zip: PLANT CITY, FL 33566 US

Title: SD () Delete
Name: DOYLE, CHARLIE
Address: 4324 HALIFAX TERRACE
City-St-Zip: ROSWELL, GA 30075 US

Title: TD () Delete
Name: FAUSNIGHT, PHILLIP J
Address: 412 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALLS, SCOTT
Address: 4603 REECE RD
City-St-Zip: PLANT CITY, FL 33566 US

Title: VPD (X) Change () Addition
Name: FAUSNIGHT, PHILLIP J
Address: 412 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PHILLIP J. FAUSNIGHT

VPD

03/25/2009

Electronic Signature of Signing Officer or Director

Date