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FILED

Mar 23 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000004449 (2)

1. Corporation Name

TRANSPORTATION SAFETY SOLUTIONS, INC.

Principal Place of Business

Mailing Address

C/O DAN BURDAN  
320 SOUTH MAIN STREET  
HIGH SPRINGS FL 32643

C/O DAN BURDAN  
320 SOUTH MAIN STREET  
HIGH SPRINGS FL 32643

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

3013 York St. South

27

Suite, Apt. #, etc.

27

City & State

28

Gulfport, FL

29

Zip

Country

29

33707-5657

30

USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/22/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ Yes

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ Yes

\$5.00 May Be

Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

BURDAN, DAN  
320 SOUTH MAIN STREET  
HIGH SPRINGS FL 32643

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

VAN HOUTEN, RON

STREET ADDRESS

17 JOHN BRENTON DR, DARTMOUTH, NOVA SCOTIA

CITY - ST - ZIP

CANADA B2X2V5

TITLE

D

☐ DELETE

NAME

BURDAN, DAN

STREET ADDRESS

320 SOUTH MAIN STREET

CITY - ST - ZIP

HIGH SPRINGS FL 32643

TITLE

D

☐ DELETE

NAME

MALENFANT, LOUIS

STREET ADDRESS

13 THOMAS STREET, DIEPPE, NEW BRUNSWICK

CITY - ST - ZIP

CANADA E1A2C4

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

☐ DELETE

CITY - ST - ZIP

☐ DELETE

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TITLE

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☐ DELETE

STREET ADDRESS

☐ DELETE

CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

March 5, 1998

813 327 1880

CR2E037 (10/97)