

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067313

FILED
Mar 18, 2008
Secretary of State

Entity Name: FLORIDA CONTRACTORS' SAFETY ASSOCIATION, INC.

Current Principal Place of Business:

1800 SECOND STREET
SUITE 909
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1800 SECOND STREET
SUITE 909
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 62-1503952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, RANDOLPH ESQ.
FOLEY & LARDNER
100 N. TAMPA STREET, SUITE 2700
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: HARRIS, G. WAYNE
Address: 1800 SECOND STREET, SUITE 909
City-St-Zip: SARASOTA, FL 34236

Title: VP S () Delete
Name: HARKAVY, JON
Address: 1501 WILSON BLVD., SUITE 1100
City-St-Zip: ARLINGTON, VA 22209

Title: DPT () Delete
Name: ROGERS, MICHAEL T
Address: 1800 SECOND STREET, SUITE 909
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: LAITALA, CHRISTOPHER
Address: GPP, 165 MASON ST. 3RD FLOOR
City-St-Zip: GREENWICH, CT 06830

Title: AS () Delete
Name: ROSS, HEATHER
Address: 1500 WILSON BLVD, SUITE 1110
City-St-Zip: ARLINGTON, VA 22209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP S (X) Change () Addition
Name: HARKAVY, JON
Address: 2233 WISCONSIN AVE., N.W., SUITE 310
City-St-Zip: WASHINGTON, DC 20007

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

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

Title: AS (X) Change () Addition
Name: ROSS, HEATHER
Address: 2233 WISCONSIN AVE., N.W., SUITE 310
City-St-Zip: WASHINGTON, DC 20007

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEATHER ROSS

AS

03/18/2008

Electronic Signature of Signing Officer or Director

Date