

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000008741

**FILED**  
**Jun 22, 2007**  
**Secretary of State****Entity Name:** FLORIDA PROVIDERS FOR TRAFFIC SAFETY, INC.**Current Principal Place of Business:**9009 MAHAN DRIVE  
SUITE 501  
TALLAHASSEE, FL 32309 US**New Principal Place of Business:**1850 LEE ROAD  
SUITE 122  
WINTER PARK, FL 32789 US**Current Mailing Address:**9009 MAHAN DRIVE  
SUITE 501  
TALLAHASSEE, FL 32309 US**New Mailing Address:**1850 LEE ROAD  
SUITE 122  
WINTER PARK, FL 32789 US**FEI Number:** 20-4762330**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CASSIDY, BART W  
9009 MAHAN DRIVE  
SUITE 501  
TALLAHASSEE, FL 32309 US**Name and Address of New Registered Agent:**QUINONES, CARY  
1850 LEE ROAD  
SUITE 122  
WINTER PARK, FL 32789 US

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: /CARY QUINONES/

06/22/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CASSIDY, BART W  
Address: 9009 MAHAN DRIVE SUITE 501  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ST ( ) Delete  
Name: SWIGART, JOHN  
Address: 9009 MAHAN DRIVE SUITE 501  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: V ( ) Delete  
Name: CASSIDY, BART P  
Address: 9009 MAHAN DRIVE SUITE 501  
City-St-Zip: TALLAHASSEE, FL 32309

Title: P ( ) Delete  
Name: HOLLEY, C. SUE  
Address: 1725 ART MUSEUM DRIVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: V ( ) Delete  
Name: GUILMET, THOMAS  
Address: 427 N PRIMROSE DRIVE  
City-St-Zip: ORLANDO, FL 32803

Title: S ( ) Delete  
Name: QUINONES, CARY  
Address: 1850 LEE ROAD, SUITE 122  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HOLLEY, C. SUE  
Address: 1725 ART MUSEUM DR  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: V (X) Change ( ) Addition  
Name: CASSIDY, BART P JR  
Address: 9009 MAHAN DRIVE, SUITE 501  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: S (X) Change ( ) Addition  
Name: QUINONES, CARY  
Address: 1850 LEE ROAD, SUITE 122  
City-St-Zip: WINTER PARK, FL 32789 US

Title: T (X) Change ( ) Addition  
Name: SWIGART, JOHN  
Address: 3092 ALOMA AVE., SUITE 205  
City-St-Zip: WINTER PARK, FL 32792 US

Title: V (X) Change ( ) Addition  
Name: GUILMET, THOMAS P  
Address: 427 N PRIMROSE DRIVE  
City-St-Zip: ORLANDO, FL 32803 US

Title: V (X) Change ( ) Addition  
Name: HOLLEY, JOEL  
Address: 1725 ART MUSEUM DR.  
City-St-Zip: JACKSONVILLE, FL 32207 US

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: /THOMAS P. GUILMET/

V

06/22/2007

Electronic Signature of Signing Officer or Director

Date