

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19365

FILED
Apr 05, 2010
Secretary of State

Entity Name: NATIONAL FIRE SAFETY COUNCIL, INC.

Current Principal Place of Business:

4065 PAGE AVENUE
MICHIGAN CENTER, MI 492540378

New Principal Place of Business:

Current Mailing Address:

4065 PAGE AVENUE
P.O. BOX 378
MICHIGAN CENTER, MI 492540378

New Mailing Address:

FEI Number: 38-2292422 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name: BENES, CARL J
Address: 2104 SCENIC HILLS DR
City-St-Zip: JACKSON, MI 49201

Title: D
Name: BLACK, BRIAN
Address: PO BOX 151
City-St-Zip: BANDERA, TX 78003

Title: VPD
Name: WALKER, GAYLORD
Address: 2027 AUGUSTA DRIVE
City-St-Zip: JACKSON, MI 49201

Title: STD
Name: LAZAROFF, PHILLIP
Address: 3037 FAWN LANE
City-St-Zip: JACKSON, MI 49201

Title: ASST
Name: REICHARD, JILL
Address: 4065 PAGE AVE.
City-St-Zip: JACKSON, MI 492041368

Title: D
Name: AKERS, CHUCK L JR
Address: 318 SE 21ST CT
City-St-Zip: OKEECHOBEE, FL 34974 US

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: GAYLORD T. WALKER

VPD

04/05/2010

Electronic Signature of Signing Officer or Director

Date