

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000077194 (6)

1. Corporation Name

RISK & SAFETY SOLUTIONS, INC.



Principal Place of Business

4976 GREENCROFT RD
SARASOTA FL 34235
US

Mailing Address

4976 GREENCROFT RD
SARASOTA FL 34235
US

3. Date Incorporated or Qualified
10/19/1994

3a. Date of Last Report
06/28/1995

2. Principal Place of Business

21 Suite Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

65-0533176

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DONOVAN, BETTY
4976 GREENCROFT RD
SARASOTA FL 34235

10. Name and Address of New Registered Agent

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 607.0502 and 607.1506, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of principal place of business agent and/or registered agent

DATE Registered Agent's signature must be dated on or after

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME P
DONOVAN, ELIZABETH
STREET ADDRESS 4976 GREENCROFT RD
CITY-STATE-ZIP SARASOTA FL

TITLE ☐ DELETE
NAME VP
DISNEY, BONNIE
STREET ADDRESS 3412 ALAMO DR
CITY-STATE-ZIP SARASOTA FL

TITLE ☐ DELETE
NAME S
DONOVAN, MICHAEL J
STREET ADDRESS 4976 GREENCROFT RD
CITY-STATE-ZIP SARASOTA FL

TITLE ☐ DELETE
NAME T
WEBB-WILSON, CYNTHIA S
STREET ADDRESS 2002 19TH ST W
CITY-STATE-ZIP BRADENTON FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Elizabeth Donovan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth Donovan

2/6/96

(941) 377-2605

CR2E034 (12/95)