

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90180 001 *****8.75
09-08-2003 90180 002 ***150.00

DOCUMENT # V73924

1. Entity Name
NATIONAL EMPLOYER SAFETY COALITION, INC.



Principal Place of Business
**1800 SECOND STREET
SUITE 909
SARASOTA FL 34236
US**

Mailing Address
**ATTN: H. LINCOLN MILLER JR
PO BOX 306
MONTPELIER VT 05601**



2. Principal Place of Business

4285 ESCONDITO CIRCLE

3. Mailing Address

4285 ESCONDITO CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number **65-0883311**

Applied For
Not Applicable

Zip

Country

34238 USA

Zip

Country

34238 USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MILLER, H. LINCOLN
4424 CALLE SERENA
SARASOTA FL 34238**

7. Name and Address of New Registered Agent

Name

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

4285 ESCONDITO CIRCLE

City

SARASOTA

FL

Zip Code

34238

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9-4-03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **HARRIS, G. WAYNE**
STREET ADDRESS **1800 SECOND STREET, SUITE 909**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **VD** ☒ Delete
NAME **HUGHES, F.I.**
STREET ADDRESS **125 S SWOOPE AVE STE 106**
CITY-ST-ZIP **MAITLAND FL 32754**

TITLE **VTD** ☒ Delete
NAME **ROGERS, MICHAEL T**
STREET ADDRESS **1800 SECOND ST STE 909**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **VD** ☒ Delete
NAME **HARKAVY, JON**
STREET ADDRESS **1501 WILSON BLVD., SUITE 1110**
CITY-ST-ZIP **ARLINGTON VA 22209**

TITLE **SD** ☒ Delete
NAME **LANZA, KELLY**
STREET ADDRESS **1800 SECOND STREET, SUITE 909**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **AS** ☒ Delete
NAME **ROY, PAMELA**
STREET ADDRESS **3336 AIRPORT RD STE 201**
CITY-ST-ZIP **BARRE VT 05641**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **C/PD** ☐ Change ☒ Addition
NAME **H. LINCOLN MILLER JR**
STREET ADDRESS **4285 ESCONDITO CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE **S/TD** ☐ Change ☒ Addition
NAME **MARGARET B. MILLER**
STREET ADDRESS **4285 ESCONDITO CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MARGARET B. MILLER** **941-929-9695**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **MARGARET B. MILLER** **9-4-03**
Date Daytime Phone #

CR2E034 (4/03)

Attachment

#55055911

NATIONAL EMPLOYER SAFETY COALITION, INC.
4285 ESCONDITO CIRCLE
SARASOTA, FL 34238

(TEL) 941-929-9695 (FAX) 941-923-7645

September 4, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: National Employer Safety Coalition, Inc
FEI #65-0883311
Document #V73924

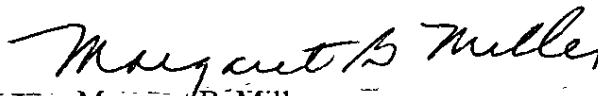
Dear Sirs:

The above referenced corporation changed ownership and management in late 2002 and as a result never received the original notice to file the 2003 Uniform Business Report.

Enclosed is the original \$150.00 filing fee because we are hoping the late fee can be waived. If not, please notify us. Also enclosed is a check for \$8.75 for a Certificate of Status.

Thank you for your cooperation in this matter.

Sincerely,


Margaret B. Miller
Secretary/Treasurer

Enc.