

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005961

Entity Name: THE FLORIDA PROVIDERS FOR TRAFFIC SAFETY, INC.**Current Principal Place of Business:**1800 PEMBROOK DR SUITE 300
ORLANDO, FL 32810**Current Mailing Address:**1800 PEMBROOK DR SUITE 300
ORLANDO, FL 32810 US**FEI Number:** 20-4762330**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARNER, NOEL
1800 PEMBROOK DR SUITE 300
ORLANDO, FL 32810 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:** NOEL WARNER

03/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PP
Name HOLLEY, CAROLYN S
Address 1725 ART MUSEUM DR.
City-State-Zip: JACKSONVILLE FL 32207

Title P, PRESIDENT
Name SMITH, ALEX
Address 618 E SOUTH ST #556
City-State-Zip: ORLANDO FL 32801

Title VD
Name HOWARD, BRANDY
Address 1145 COURT STREET
City-State-Zip: CLEARWATER FL 33756

Title VD
Name ADAMS, RICK
Address 5811 MEMORIAL HWY., SUITE 108
City-State-Zip: TAMPA FL 33615

Title TREASURER
Name WARNER, NOEL
Address 1800 PEMBROOK DR SUITE 300
City-State-Zip: ORLANDO FL 32810

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: NOEL WARNER

TREASURER

03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date