Current Mailing Address: 2839 HARVEST MOON DRIVE ORANGE PARK, FL 32073				
FEI Number: 45-4013926			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
ADKINS, AMAN 2839 HARVEST ORANGE PARH				
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	: AMANDA M. ADKINS			01/21/2014
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Officer/Dire	ctor Detail : PRES	Title	VP	
		Title Name	VP ADKINS, JOEY B	
Title	PRES			
Title Name	PRES ADKINS, AMANDA M 2839 HARVEST MOON DRIVE	Name Address	ADKINS, JOEY B	
Title Name Address	PRES ADKINS, AMANDA M 2839 HARVEST MOON DRIVE	Name Address	ADKINS, JOEY B 2839 HARVEST MOON DRIVE	
Title Name Address City-State-Zip:	PRES ADKINS, AMANDA M 2839 HARVEST MOON DRIVE ORANGE PARK FL 32073	Name Address	ADKINS, JOEY B 2839 HARVEST MOON DRIVE	
Title Name Address City-State-Zip: Title	PRES ADKINS, AMANDA M 2839 HARVEST MOON DRIVE ORANGE PARK FL 32073 SEC	Name Address	ADKINS, JOEY B 2839 HARVEST MOON DRIVE	

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA ADKINS

Electronic Signature of Signing Officer/Director Detail

Entity Name: SAFEGUARD MANUFACTURING AND DEVELOPMENT, INC.

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2839 HARVEST MOON DRIVE ORANGE PARK, FL 32073

DOCUMENT# P11000104428

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FILED Jan 21, 2014 **Secretary of State** CC8515621675

PRESIDENT

Date