

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003470

**Entity Name:** FIRSTONSITE RESTORATION, INC.

**Current Principal Place of Business:**

185 MOLLY WALTON DRIVE  
HENDERSONVILLE, TN 37075

**Current Mailing Address:**

185 MOLLY WALTON DRIVE  
HENDERSONVILLE, TN 37075 XX

**FEI Number:** 45-3115488

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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:** ALEXIS CASSIDY

02/14/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PC  
Name DEMOS, DAVID  
Address 170 UNIVERSITY AVENUE, SUITE 403  
City-State-Zip: TORONTO,ON CANADA M5H 3B3 XX

Title VPVC  
Name DERRAUGH, BRUCE  
Address 170 UNIVERSITY AVENUE, SUITE 403  
City-State-Zip: TORONTO,ON CANADA M5H 3B3 XX

Title S  
Name BRATZEL, ANDREW D  
Address 33 N LASALLE ST, SUITE 1400  
City-State-Zip: CHICAGO IL 60602

Title TD  
Name KAMERMAN, ALLAN  
Address 170 UNIVERSITY AVENUE, SUITE 403  
City-State-Zip: TORONTO,ON CANADA M5H 3B3 XX

Title D  
Name LEVER, ALAN  
Address 170 UNIVERSITY AVENUE, SUITE 403  
City-State-Zip: TORONTO,ON CANADA M5H 3B3 XX

Title VP  
Name SHORT, BILLY  
Address 185 MOLLY WALTON DRIVE  
City-State-Zip: HENDERSONVILLE TN 37075

*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:** BILLY SHORT

VP

02/14/2014

Electronic Signature of Signing Officer/Director Detail

Date