2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299307

FILED Jan 25, 2006 Secretary of State

Entity Name: SOUTH ATLANTIC FIRE EQUIPMENT COMPANY, INC.

| urrent P | rincipal Place of Business: | New Principal Place | of Business: |
|---|--|---|--|
| | EAVER ST VILLE, FL 322542868 US | 4555 SAN JUAN AVE JACKSONVILLE, FL 3 | 2210 US |
| urrent M | ailing Address: | New Mailing Address | :: |
| 848 IONIO ACKSON | C AVE VILLE, FL 32210 US | | |
| El Number: | 59-1108348 FEI Number Applied For () FE | l Number Not Applicable() | Certificate of Status Desired () |
| lame and | Address of Current Registered Agent: | Name and Address of | f New Registered Agent: |
| 848 IONI | HOMAS A C AVE VILLE, FL 32210 US | | |
| | named entity submits this statement for the purpo | se of changing its registered | d office or registered agent, or both |
| n the State | e of Florida. | se of changing its registered | d office or registered agent, or both |
| | e of Florida. ************************************ | se of changing its registered | |
| n the State | e of Florida. | se of changing its registered | d office or registered agent, or both Date |
| n the State | e of Florida. RE: Electronic Signature of Registered Agent | | |
| n the State SIGNATUR SIECTION Car DFFICERS ittle: ame: ddress: city-St-Zip: | E of Florida. RE: Electronic Signature of Registered Agent Impaign Financing Trust Fund Contribution (). S AND DIRECTORS: D () Delete BRYAN, SUE M 3954 MCGIRTS BLVD JACKSONVILLE, FL 32210 US | ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: | Date S TO OFFICERS AND DIRECTO () Change () Addition |
| n the State SIGNATUF SIEction Car DFFICERS title: lame: ddress: | E of Florida. RE: Electronic Signature of Registered Agent Impaign Financing Trust Fund Contribution (). S AND DIRECTORS: D () Delete BRYAN, SUE M 3954 MCGIRTS BLVD | ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: | Date ES TO OFFICERS AND DIRECTO |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS A. BRYAN P 01/25/2006