## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 397481** 

Entity Name: RELIABLE SPRINKLER SYSTEMS, INC

FILED Jan 15, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|                                      |                                  |

3200 ROWLAND DRIVE PUNTA GORDA, FL 33952 US

Current Mailing Address: New Mailing Address:

P.O. BOX 511734 POST OFFICE BOX 1734 PUNTA GORDA, FL 339511734 US

FEI Number: 58-1127159 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MACOMBER, ROBERT M.
2311 MARK AVENUE
PUNTA GORDA, FL 33952 US
MACOMBER, MICHAEL DAMON
3200 ROWLAND DRIVE
PUNTA GORDA, FL 33952 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: MICHAEL DAMON MACOMBER 01/15/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition MACOMBER, ROBERT M, MACOMBER, ROBERT M, Name: Name: 2311 MARK AVENUE 2311 MARK AVENUE Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete Title: () Change () Addition

 Name:
 MACOMBER, DIANN,
 Name:

 Address:
 2311 MARK AVENUE
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:

Title: V () Delete Title: P (X) Change () Addition

Name:MACOMBER, MICHAEL DName:MACOMBER, MICHAEL DAddress:3200 ROWLAND DR.Address:3200 ROWLAND DR.City-St-Zip:PUNTA GORDA, FL 33980City-St-Zip:PUNTA GORDA, FL 33980

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA DIANN MACOMBER SEC 01/15/2008