

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 525238

FILED
Jan 21, 2009
Secretary of State

Entity Name: RODAN FIRE SPRINKLERS, INC.

Current Principal Place of Business:

2501 N 70TH STREET
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

2501 N 70TH STREET
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-1716869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGLIANO, JOHN J ESQ.
201 NORTH FRANKLIN STREET, SUITE 2600
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: BUCKLER, CAROL L
Address: 17615 WHISTLING LANE
City-St-Zip: LUTZ, FL 33549

Title: P () Delete
Name: BENKE, RONALD J
Address: 24384 DAN BROWN HILL ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: VP-S () Delete
Name: LECORNU, BURTON D
Address: 12806 N BOULEVARD
City-St-Zip: TAMPA, FL 33612

Title: VP () Delete
Name: CLARK, KENNETH C
Address: 199 SALZEDO STREET
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP-S () Delete
Name: BARROW, JERRY T
Address: 11215 TAFF LANE
City-St-Zip: SEFFNER, FL 33584

Title: D () Delete
Name: ROOKS, RONALD D
Address: 515 W. BAY STREET, 101
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CAROL L. BUCKLER

ST

01/21/2009

Electronic Signature of Signing Officer or Director

Date