## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000543

Entity Name: FIRE PRODUCTS GP HOLDING, INC

FILED Apr 14, 2004 Secretary of State

Thirty Hamer Find Find State of Field Investigation (Investigation Control of Find State of Field Investigation Control of Find State of Field Investigation Control of Find State of Field Investigation Control of Fiel						
Current Principal Place of Business:				New Principal Place of Business:		
ONE TYCO PARK EXETER, NH 03833				THREE HOLLAND WAY EXETER, NH 03833		
Current Mailing Address:				New Mailing Address:		
ONE TYCO PARK EXETER, NH 03833				P O BOX 8749 PRINCETON, NJ 08543		
FEI Number:	58-2473927	FEI Number Applied For()	FEI Number Not Ap	pplicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name ar	Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State		ty submits this statement for the pu	rpose of changing	g its registered o	office or registered agent, or both,	
SIGNATUR						
Electronic Signature of Registered Agent					Date	
Election Cam	paign Finand	cing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:		()Delete RIAN PRATE DR, SUITE 100 ITH, NH 038016807	Title: Name: Address: City-St-Zip	MEAD, ROBER THREE HOLLA	ND WAY	
Title: Name: Address: City-St-Zip:	FOLEY, MAI ONE TOWN	() Delete RK D CENTER ROAD N, FL 33486	Title: Name: Address: City-St-Zip	STAFFORD, R THREE HOLLA	ND WAY	
Title: Name: Address: City-St-Zip:	STEVENSON ONE TOWN	() Delete N, SCOTT CENTER ROAD N, FL 33486	Title: Name: Address: City-St-Zip	HUND-MEJEAN THREE HOLLA	ND WAY	
Title: Name: Address: City-St-Zip:	T ROBINSON, 712 FIFTH A NEW YORK		Title: Name: Address: City-St-Zip	•	) Change ()Addition	
Title: Name: Address: City-St-Zip:		(X) Delete ERT P RATE DR, SUITE 100 ITH, NH 038016807	Title: Name: Address: City-St-Zip	`	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT PETER MEAD P 04/14/2004