

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004154

Entity Name: BRAUN INDUSTRIES, INC.

FILED
Jul 20, 2009
Secretary of State

Current Principal Place of Business:

1170 PRODUCTION DRIVE
VAN WERT, OH 45891

New Principal Place of Business:

Current Mailing Address:

1170 PRODUCTION DRIVE
VAN WERT, OH 45891

New Mailing Address:

FEI Number: 31-0792103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIRE FIGHTING INNOVATIONS, INC.
300 VISCAYA AVENUE
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: BRAUN, PHILLIP C
Address: 1170 PRODUCTION DRIVE
City-St-Zip: VAN WERT, OH 45891

Title: VCST () Delete
Name: BRAUN, CHARMA A
Address: 1170 PRODUCTION DRIVE
City-St-Zip: VAN WERT, OH 45891

Title: D () Delete
Name: MILLER, MARK
Address: 18107 US 24 WEST
City-St-Zip: DELPHOS, OH 45853

Title: D () Delete
Name: BAGLEY, JON
Address: 1143 ROSALIE DRIVE
City-St-Zip: VAN WERT, OH 45891

Title: D () Delete
Name: SCHULTE, ROBERT
Address: 216 NORTH ELIZABETH STREET
City-St-Zip: LIMA, OH 45802

Title: D () Delete
Name: SCHLATER, PAUL
Address: 10445 DOWLING STREET
City-St-Zip: PERRYSBURG, OH 43551

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCT (X) Change () Addition
Name: ELICK, KIM L
Address: 1170 PRODUCTION DRIVE
City-St-Zip: VAN WERT, OH 45891

Title: VCS (X) Change () Addition
Name: BRAUN, CHARMA A
Address: 1170 PRODUCTION DRIVE
City-St-Zip: VAN WERT, OH 45891

Title: OCOB (X) Change () Addition
Name: BRAUN, PHILLIP C
Address: 1170 PRODUCTION DRIVE
City-St-Zip: VAN WERT, OH 45891

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

Title: D (X) Change () Addition
Name: LAUX, PAT
Address: 2200 W. MONROE ST., PO BOX 357
City-St-Zip: KALIDA, OH 45853

Title: D (X) Change () Addition
Name: SCHLATTER, PAUL
Address: 10445 DOWLING STREET
City-St-Zip: PERRYSBURG, OH 43551

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: KIM ELICK

PCT

07/20/2009

Electronic Signature of Signing Officer or Director

Date