

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001612

FILED
Apr 01, 2008
Secretary of State

Entity Name: TOTAL FIRE PROTECTION, INC.

Current Principal Place of Business:

141 REGENCY PRK DR
ALABASTER, AL 35007

New Principal Place of Business:

141 REGENCY PARK DRIVE
ALABASTER, AL 35007

Current Mailing Address:

141 REGENCY PRK DR
ALABASTER, AL 35007

New Mailing Address:

141 REGENCY PARK DRIVE
ALABASTER, AL 35007

FEI Number: 63-1193053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: BLACK, DONALD R
Address: 1032 GRANDE VIEW PASS
City-St-Zip: MAYLENE, AL 35114

Title: VPT () Delete
Name: BLACK, TOMMY N
Address: 133 DOGWOOD TRAIL
City-St-Zip: MONTEVALLO, AL

Title: S () Delete
Name: BLACK, MELISSA K
Address: 133 DOGWOOD TRAIL
City-St-Zip: MONTEVALLO, AL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPT (X) Change () Addition
Name: BLACK, TOMMY N
Address: 133 DOGWOOD TRAIL
City-St-Zip: ALABASTER, AL 35007

Title: S (X) Change () Addition
Name: BLACK, MELISSA K
Address: 133 DOGWOOD TRAIL
City-St-Zip: ALABASTER, AL 35007

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: DONALD R. BLACK

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date