

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F76845

FILED  
May 01, 2009  
Secretary of State

Entity Name: PRESTIGE FIRE SPRINKLER, INC.

**Current Principal Place of Business:**

3155 GATEWAY LANE  
CANTONMENT, FL 32533 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7189  
PENSACOLA, FL 32534 US

**New Mailing Address:**

FEI Number: 59-2212771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RILEY, SHAWN PATRICK  
5757 HUNTERS OAK TRAIL  
MILTON, FL 32570 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: PSD ( ) Delete  
Name: RILEY, SHAWN P PSD  
Address: 5757 HUNTERS OAK TRAIL  
City-St-Zip: MILTON, FL 32570 US

Title: VTD ( ) Delete  
Name: RILEY, JASON N VTD  
Address: 5787 HUNTERS OAK TRAIL  
City-St-Zip: MILTON, FL 32570 US

Title: V ( ) Delete  
Name: PASSAUR, JOHN G V  
Address: 9777 QUAIL HOLLOW COURT  
City-St-Zip: PENSACOLA, FL 32514 US

**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:

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: SHAWN P. RILEY

PSD

05/01/2009

Electronic Signature of Signing Officer or Director

Date