2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2010
Secretary of State

DOCUMENT# F93000002316

Entity Name: ENSAFE INC.

Current Principal Place of Business:

5724 SUMMER TREES DR.
MEMPHIS, TN 38134

New Principal Place of Business:

Current Mailing Address:

5724 SUMMER TREES DR.
MEMPHIS, TN 38134

New Mailing Address:

FEI Number: 58-1402235 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DCP
Name: COOP, PHILLIP G
Address: 5724 SUMMER TREES DR.
City-St-Zip: MEMPHIS, TN 38134

Title: DVCS
Name: SPEAKMAN, JAMES N
Address: 5724 SUMMER TREES DR.
City-St-Zip: MEMPHIS, TN 38134

Title: DVP
Name: WOOD, MICHAEL A
Address: 5724 SUMMER TREES DR.
City-St-Zip: MEMPHIS, TN

Title: DVP
Name: STODDARD, PAUL V
Address: 5724 SUMMER TREES DR.
City-St-Zip: MEMPHIS, TN

Title: DV
Name: WISE, CRAIG A
Address: 5724 SUMMER TREES DR
City-St-Zip: MEMPHIS, TN

Title: DV
Name: GRAY-DAVIS, GINNY L
Address: 525 VINE STREET, SUITE 1755
City-St-Zip: CINCINNATI, OH 45202

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL A WOOD CFO 03/11/2010

Electronic Signature of Signing Officer or Director Date