2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005175

Entity Name: KIDDE FIRE TRAINERS, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
17 PHILIPS PARKWAY MONTVALE, NJ 07645				17 PHILIPS PARKWAY MONTVALE, NJ 07645 US		
Current Mailing Address:				New Mailing Address:		
	PINGS ROAD TON, CT 0603	2 US				
FEI Number:	: 22-2894089	FEI Number Applied For ()	FEI Number No	t Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name	and Address of N	lew Registered Agent:	
1200 SOU	ORATION SYS TH PINE ISLAN ON, FL 33324					
	named entity s e of Florida.	ubmits this statement for the	purpose of chang	ging its registered o	office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	T () MCCADDEN, JO 400 MAIN STRE ASHLAND, MA	ET	Title: Name: Addres City-St-	DEVIN s: 9 FARM SPRIN		
Title: Name: Address: City-St-Zip:	P () DOWNIN, ROBE 17 PHILIPS PAF MONTVALE, NJ	RKWAY	Title: Name: Addres City-St-	KASH s: 17 PHILIPS PA		
Title: Name: Address: City-St-Zip:	S () PERRAULT, ALI 9 FARM SPRING FARMINGTON,	3S ROAD	Title: Name: Addres: City-St-	ALICIA s: 9 FARM SPRIN		
Title: Name: Address: City-St-Zip:	D () FOLSOM, HARO 9 FARM SPRING FARMINGTON,	GS ROAD	Title: Name: Addres City-St	DONNA LYNN s: 9 FARM SPRIN		
Title: Name: Address: City-St-Zip:	D (X) LINDROTH, BRI 9 FARM SPRING FARMINGTON,	GS ROAD	Title: Name: Addres City-St-	s:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D (X) WINE, SCOTT 9 FARM SPRING FARMINGTON,		Title: Name: Addres City-St-	s:) Change ()Addition	

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: ALICIA PERRAULT S 04/15/2009