2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006332

Entity Name: REVERE CONTROL SYSTEMS, INC.

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:		
	KY RIDGE RO IAM, AL 3521					
Current M	lailing Addre	ss:	New Mailing Address:			
	KY RIDGE RO IAM, AL 3521					
FEI Number:	: 63-0794615	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and Address	s of New Registered Agent:		
1200 SOU PLANTATI The above	PORATION SY TH PINE ISLA ON, FL 3332 named entity	ND ROAD 4 US	urpose of changing its registe	red office or registered agent, or both,		
SIGNATUF						
SIGNATOR		nic Signature of Registered Age	nt	 Date		
Election Car		g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (ADAMS, ROBE 1504 BUCKHE BIRMINGHAM,	AD DR.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HOLLEMAN, B	CREEK CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T (ADAMS, THOM 5643 POCAHO BESSEMER, A	NTAS RD.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V (PADEN, DAVIE 1722 SAULTEI BIRMINGHAM,	R RD.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V (BRADDOCK, T 932 ALFORD A BIRMINGHAM,	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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:	DAVID M. PADEN	VP	01/04/2007