

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003601

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: MCDANIEL FIRE SYSTEMS, INC.

## Current Principal Place of Business:

1055 W. JOLIET RD.  
VALPARAISO, IN 46385

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 70  
VALPARAISO, IN 46383

## New Mailing Address:

FEI Number: 35-1005016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: ST ( ) Delete  
Name: BROWN, REBECCA L  
Address: P.O. BOX 70  
City-St-Zip: VALPARAISO, IN 46383

Title: P ( ) Delete  
Name: SCHENCK, R R  
Address: 1652 SHERWOOD  
City-St-Zip: VALPARAISO, IN

Title: V ( ) Delete  
Name: ADKINS, GEORGE D  
Address: 2353 SAGER RD.  
City-St-Zip: VALPARAISO, IN 46383

Title: V ( ) Delete  
Name: BURNS, PATRICK T  
Address: 832 TANNER  
City-St-Zip: VALPARAISO, IN

Title: V ( ) Delete  
Name: ROWLETT, DENNIS O  
Address: 2508 RAY ALLEN  
City-St-Zip: MARION, IL 62959

Title: VP ( ) Delete  
Name: POPE, LARRY I  
Address: 65 WORCHESTER DR  
City-St-Zip: VALPARAISO, IN 46383

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: BLEDSOE, RICHARD D  
Address: 1055 W. JOLIET RD.  
City-St-Zip: VALPARAISO, IN 46385

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

Title: V (X) Change ( ) Addition  
Name: EVANS, ROBERT L  
Address: 447 MEADOWBROOK DR.  
City-St-Zip: VALPARAISO, IN 46383

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 for the exemption stated in Section 119.07(3)(i), 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: REBECCA BROWN

ST

04/13/2005

Electronic Signature of Signing Officer or Director

Date