

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003601

FILED
Apr 05, 2006
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: BLEDSOE, RICHARD D
Address: 1055 W. JOLIET RD.
City-St-Zip: VALPARAISO, IN 46385

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

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

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

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

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Address:
City-St-Zip:

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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 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: REBECCA BROWN

S

04/05/2006

Electronic Signature of Signing Officer or Director

Date