

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001615

FILED
Aug 10, 2006
Secretary of State

Entity Name: ELITE FIRE PROTECTION, INC.

Current Principal Place of Business:

6781 GULF SHORE PKWY
GULF SHORES, AL 36542 US

New Principal Place of Business:

22649 CANAL ROAD
ORANGE BEACH, AL 36561 US

Current Mailing Address:

PO BOX 4369
GULF SHORES, AL 36547 US

New Mailing Address:

FEI Number: 72-1370628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: CP () Delete
Name: NUGENT, D. SCOTT
Address: 6781 GULF SHORES PKY
City-St-Zip: GULF SHORES, AL 36542

Title: VC () Delete
Name: HINES, CHARLES S
Address: 6781 GULF SHORES PKY
City-St-Zip: GULF SHORES, AL 36542

Title: V () Delete
Name: NUGENT, JANAI A
Address: 6781 GULF SHORES PKY
City-St-Zip: GULF SHORES, AL 36542

Title: S () Delete
Name: HINES, RHONDA
Address: 6781 GULF SHORES PKY
City-St-Zip: GULF SHORES, AL 36542

Title: T () Delete
Name: HINTON, LILA
Address: 6781 GULF SHORES PKY
City-St-Zip: GULF SHORES, AL 36542

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:

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 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: LILA HINTON

T

08/10/2006

Electronic Signature of Signing Officer or Director

Date