

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006760

FILED
Jan 12, 2007
Secretary of State

Entity Name: THE RELIABLE AUTOMATIC SPRINKLER CO. INC.

Current Principal Place of Business:

525 NORTH MACQUESTERN PARKWAY
MT. VERNON, NY 10552

New Principal Place of Business:

103 FAIRVIEW PARK DRIVE
ELMSFORD, NY 10523

Current Mailing Address:

525 NORTH MACQUESTERN PARKWAY
MT. VERNON, NY 10552

New Mailing Address:

103 FAIRVIEW PARK DRIVE
ELMSFORD, NY 10523

FEI Number: 13-1727035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POULTON, ROBERT K
263 HUNT PARK COVE
LONGWOOD, FL 32750 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: D () Delete
Name: FEE, CANDIDA M
Address: 72 BERKSHIRE ROAD
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: PVCT () Delete
Name: FEE, FRANK J III
Address: 2 BEECHWOOD LANE
City-St-Zip: SCARSDALE, NY 10583

Title: VDS () Delete
Name: FEE, KEVIN T
Address: 111 WHITEHALL BLVD.
City-St-Zip: GARDEN CITY, NY 11530

Title: D () Delete
Name: FEE, MICHAEL R
Address: 83 WESTMINSTER ROAD
City-St-Zip: GARDEN CITY, NY 11530

Title: VP () Delete
Name: HULTGREN, ROBERT C
Address: 21 SHARON COURT
City-St-Zip: SHELTON, CT 06484

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: R. C. HULTGREN

VP

01/12/2007

Electronic Signature of Signing Officer or Director

Date