## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 05 1998 8:00am

Secretary of State

11/20/00

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G77962

(0)

DELRAY FIRE EXTINGUISHER SERVICE, INC.

Principal Place of Business			Mailing Address					- 1100001	8811 18813 <del>1</del> 8838 18116 831	IO IIOI ORDII OR		0(  <b>   0</b>      0
350 107 BUSINESS PARKWAY ROYAL PALM BEACH FL 33411 US		R	350-107 BUSINESS PARKWAY ROYAL PALM BEACH FL 33411 US					DO NOT WRITE IN THIS SPACE				
									orporated or Qualifi	ed		
6 Drivers of D	1	100	Mailing Address					01/09/ 4. FEL Num		<del>-</del>	<del></del>	1 1 1
2. Principal Place of Business			2a. Mailing Address						371165			Applied For Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.							<u></u>		Additional
22			27					5. Certificat	te of Status Desired			Required
City & State			City & State					6. Election	Campaign Financin		\$5.0	May Be
23			28						nd Contribution			d to Fees
Zip	Country Zrp 25 29			Country				1	poration owes or has	•		ntangible □ No
24	9. Name and Address of Curren		tered Agent	30	30			Personal Property Tax due June 30. Yes I No  10. Name and Address of New Registered Agent				
НО	EFS, CONNIE				81	Name	<del></del>					
350-107 BUSINESS PARKWAY						Stree	t Addre	ss (P.O. Box N	lumber is Not Acce	ptable)		
ROYAL PALM BEACH FL 33411					82		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
					83							
					84	City				F	85 Zi	o Code
44 Durauant	to the provisions of Spelions 607 050	a had 6	07 1508 Florida Statu	toe the s	boye	a-name	d corpo	oration submits	this statement for t	he nurnose	of changing	its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
_	Marinal will, and accept the oblige	110115 0	245)	onua sie	IIUIGS	>.						
SIGNATURE	Signature, typed or printed name of registered ago			1f Register	ed Age	eni signatu	re require	d whon reinstaling)		DATE		
12.	OFFICERS AND	DIREC		13.			- <del> </del>		IS/CHANGES TO O	FFICERS A		
TITLE	D D		☐ DELETE	1.1 1			18/	1			Change	Addition
NAME	HOEFS, CONNIE 850-107 Business Parkway	,		1	JAME STORET	LDDOFAA						
STREET ADDRESS  CITY-ST-ZIP	ROYAL PALM BEACH FL				HEET HTY-S	ADDRESS						
TITLE	D		DELETE	2.11		11 - 2.11	197	VP			Change	Addition
NAME :	HOEFS, CHARLES B.			2.21	IAME		1, (	••			• •	
STREET ADDRESS	350-107 BUSINESS PARKWAY	,		2.3 9	STREET	ADDRESS						
CITY+ST-ZIP	ROYAL PALM BEACH FL					ST-ZIP	<u> </u>					
TITLE			DELETE	311							☐ Change	Addition
NAME					IAME	4888500						
STREET ADDRESS						ADDRESS St-Zip						
CITY-ST-ZIP TITLE			☐ DELETE	4.1 1		51 - £1F	+				Change	Addition
NAME				4.2	NAME							
STREET ADDRESS				4.3 9	TREET	ADDRESS						
CITY-ST-ZIP	·			4.4 (	DIY-S	T-ZIP			·			
TITLE	i <sub>e</sub>		☐ DELETE	5.11	ITLE						Change	Addition
NAME	:				IÀME							
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			DELETE	6.11	ITLE	T - ZIP					Change	Addition
TITLE NAME				1	IAME						0.0.19	
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP				6.4 (	ity-s	ĭ-ZIP						
14 I hereby c	certify that the information supplied wi on this annual report or supplementa	th this t	filing does not qualify to	for the ex	emp	tion sta	ted in S	Section 119.07	(3)(i), Florida Statute	es. I further	certify that t	ne information
officer or	director of the corporation or the rece or Block 13 if changed, or on an atlact	iver or	trustee empowered to	execute	this	report a	s requi	ired by Chapte	or 607, Florida Statu	tes; and the	it my name a	ppears in