


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 05, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H90849</b> 1. Entity Name VERO SPRINKLER SYSTEMS INC.	
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Principal Place of Business 1170 9TH ST SW STE 2 VERO BEACH, FL 32960	Mailing Address % JOHN R. KLUNTZ PO BOX 1628 VERO BEACH, FL 32961-1628
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**DO NOT WRITE IN THIS SPACE**



08252006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2637281	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

KLUNTZ, JOHN R.  
9775 61ST PLACE  
SEBASTIAN, FL 32958

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KLUNTZ, JOHN R. 9775 61ST PLACE SEBASTIAN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KLUNTZ, ERICA 4460 60TH AVENUE VERO BEACH, FL 32967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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09/05/06-800009-014 550.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Erica A. Kluntz* *John R. Kluntz*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-24-06 772-507-1559  
Date Daytime Phone #