2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J26322

FILED Aug 01, 2008 Secretary of State

Entity Name: CENTRAL FIRE AND SAFETY EQUIPMENT, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	HIGHWAY 31 , FL 34266	US			
Current Mailing Address:			New Mailing Address:		
	HIGHWAY 31 , FL 34266	US			
El Number	: 59-2487316	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
ame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
901 SE H	S, DAVID E HIGHWAY 31				
RCADIA	, FL 34266	US			
he above	,		purpose of changing its registere	ed office or registered agent, or both,	
he above the Stat	e named entity e of Florida.		purpose of changing its registere	d office or registered agent, or both,	
he above the Stat	e named entity e of Florida. RE:			ed office or registered agent, or both,	
he above the Stat IGNATU accordar	e named entity e of Florida. RE: Electronce with s. 607.1	v submits this statement for the	ent		
he above the Stat GNATU accordar lection Ca	e named entity e of Florida. RE: Electronce with s. 607.1	v submits this statement for the point Signature of Registered Ag 193(2)(b), F.S., the corporation did nong Trust Fund Contribution ().	ent ot receive the prior notice.		
he above the Stat IGNATU accordar lection Ca	e named entity e of Florida. RE: Electro nce with s. 607.1 mpaign Financi S AND DIRE	onic Signature of Registered Ag 193(2)(b), F.S., the corporation did n 193(Trust Fund Contribution (). CTORS: 1 Delete AVID E CALYPUS AVE	ent ot receive the prior notice.	Date	
he above the Stat GNATU accordar lection Ca FFICER tte: ame: ddress:	e named entity e of Florida. RE: Electronce with s. 607.1 mpaign Financi S AND DIRE P (WILLIAMS, D 1259 NW EUG ARCADIA, FL S (WILLIAMS, S	v submits this statement for the poinc Signature of Registered Ag 193(2)(b), F.S., the corporation did n ng Trust Fund Contribution (). CTORS:) Delete AVID E CALYPUS AVE 34266) Delete HERRI L CALYPUS AVE	ent ot receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

I hereby certify that the information supplied with this filing does not qualify 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:	DAVID E WILLIAMS	Р	08/01/2008
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