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

CITY-ST-ZIP

FILED May 22 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** J29908 PIPER FIRE PROTECTION, INC. Principal Place of Business Mailing Address 956 SOUSA DBIVE LARGO FL/34641 956 SOUSA DRIVE **LARGO FL 34641** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/22/1986 2. Principal Place of Business 2a. Mailing Address Applied For 12600 S. BELLHER RI 10 BUN 9005 59-2780461 Not Applicable Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired //3 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be CACUS CARGO 23 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent JOHNSON, TERRENCE R. 956 SOUSA DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34641** R3 City Zip Code FI 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.

SIGNATURE (NOTE Registered Agent signature required when teinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PTD DELETE Change Addition TITLE 1.1 HILE NAME JOHNSON, TERRENCE R. 1.2 NAME 956 SOUSA DRIVE STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4_CITY-\$1-ZIP DELETE Change Addition TITLE VSD 2.1 TITLE NAME JOHNSON, CHRIS R 2.2 NAME STREET ADDRESS 1317 YOUNG AVE 2.3 STREET ADDRESS CLEARWATER FL CITY-ST-ZIP 2.4 City-S1-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if 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 12 or Block 13 if changed, or on an attachment with an address.

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