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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 25 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J30873

(0)

SPRINKLER INSPECTION SERVICE, INC.

MANE MANAGEMENT	LEN MOPEONION SERVIO	E, 110.								
Principal Plac	e of Business	Mailing	Mailing Address				i nonesia minn sisis naidi batti dhabb sitt		/DIA DIBRA (	#1816 1981
3299 MUSTANG DRIVE SPRING HILL FL 34609			3299 MUSTANG DRIVE SPRING HILL FL 34609-8111							
							3. Date Incorporated or Qualified 08/28/1986	3a. Date o 03/12/		eport
—¬	lace of Business	r1	2a. Mailing Address				4. FEI Number		Ap	plied For
21 Code Ant	Д		26				59-2713139	ж	-	t Applicable
Sude, Apt	#, total	1	Suite, Apt #, etc.				5. Certificate of Status Desired	□ <b>\$</b>	8.75 A Fee Re	Additional
City & State	e		City & State				6 Ft-1 0			<del></del>
23		28					6. Election Campaign Financing Trust Fund Contribution		<b>O.UU</b> Added to	May Be
Zip	Country	Zip		Col	intry		This corporation has liability for:			
24	25	29		30				Yes N		100,002,
	g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agen				it	
LAW	VRENCE, RALPH E.				81 Name					
1416 FINDLAY AVE.					82 Street	Addres	s (P.O. Box Number is Not Acceptat	ie)		
SPR	ING HILL FL 34609									
					83			•		
					84 City			B4 85	Zip C	Code
					<u> </u>			FL	'	
11. Pursuant office or r	to the previsions of Sections 607.05 rea stered agent, or both, in the Stat	02 and 607,150 e <b>o</b> f Florida. Su	08, Florida Statu ich change was	tes, the a authorize	bove-named d by the corn	corpor	ation submits this statement for the p	urpose of cha	nging its	s registered
agent La	m fam liar with, and accept the obli	gations of, Sect	ion 607.0505, F	lorida Sla	tutes.		's board of directors. I hereby accep	re the appoint	ion go	registered
SIGNATURE	5.0 · · · · · · · · · · · · · · · · · · ·									
12.	Signal no, typical or printed name of registered at OFFICERS At	gens and the il applic ND DIRECTORS		16 Registere	d Agent signature	required		DATE	COTOD	0.11.40
TITLE	PD	VD DINEGIONS	DELETE	1.1 [	T) E	, <b></b>	ADDITIONS/CHANGES TO OFFIC		ECTOR: Change	S IN 12 Addition
NAME	LAWRENCE, RALPH E.			12 N				<u>.</u>	manyo	L. Addition
STREET ACORESS	1416 FINDLAY AVE.				TREET ADDRESS					
CITY-S*-ZIP	SPRING HILL FL				ITY-ST-ZIP					
TITLE	V		DETELE	2.1 T)				П	Change	Addition
NAME	SHAUN E. LAWRENCE			2.2 N					· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS	5510 BAFFIN CIRCLE				TREET ADDRESS					
0:1Y-S1-ZIP	SPRING HILL FL				ITY-ST-ZIP					
TITLE	8		DECETE	3.1 11					Change	Addition
NAME	BILLIE L. LAWRENCE			3.2 N	AME				,	
STREET ADDRESS	1416 FINDLAY AVE.			3.3 \$	TREET ADDRESS					
CHY-ST-ZIP	SPRING HILL FL			3.4. C	ITY-ST-ZIP					
7111 (			DELETE	4.1 TI	TLE				Change	Addition
NAME				4.2 N	AME					
STREET ADDRESS				4.3 S	TREET ADDRESS					
CITY-ST-ZIP					TY-ST-ZIP	<u>.</u>				
THILE			DELETE	5.1 1	TLE				Change	Addition
NAME				5.2 N						
STREET ADDRESS				5.3 \$1	IREET ADDRESS					
CITY - ST - ZIP			DOLOTE		TY-ST-ZIP			····		
TITLE			DELETE	6.1 11				Ш	Change	☐ Addition
NAME				62 N						
STREET ADDRESS				6.3 ST	REET ADDRESS					

14. I do hereby ccritly 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 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 12 or Block 13 if changed, or on an attachment with an address.