


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr-21, 2004 08:00 AM
Secretary of State

DOCUMENT # J32893
 1. Entity Name
 PALM BEACH FIRE SPRINKLER, INC.



Principal Place of Business Mailing Address
 % MARSHALL P. RICHARDSON
 6982 COUNTRY PLACE ROAD
 WEST PALM BEACH, FL 33411
 % MARSHALL P. RICHARDSON
 6982 COUNTRY PLACE ROAD
 WEST PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE



04172004 No Chg-P CR2E034 (10/03)

4. FEI Number
 59-2722677 App'ed For
 Not App'ed For

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RICHARDSON, MARSHALL PAUL
 6982 COUNTRY PLACE ROAD
 WEST PALM BEACH, FL 33411

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8. The above named entity suoms 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 corporations registered agent

SIGNATURE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

000000122060
 04/21/04-80012-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	PD RICHARDSON, MARSHALL P. 6982 COUNTRY PLACE ROAD WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VTS RICHARDSON, MARSHALL P. 6982 COUNTRY PLACE RD. WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c) Florida Statutes. I further certify that the information indicated on this report or subsequent reports 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 a power of attorney.

SIGNATURE: Marshall P. Richardson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR