

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90014 041 ***150.00

DOCUMENT # J32893

1. Entity Name
PALM BEACH FIRE SPRINKLER, INC.



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

Mailing Address
**% MARSHALL P. RICHARDSON
6982 COUNTRY PLACE ROAD
WEST PALM BEACH, FL 33411**



2. Principal Place of Business

7810 S.E. River Lane
Suite, Apt. #, etc.

3. Mailing Address

7810 S.E. River Lane
Suite, Apt. #, etc.

01272006 Chg-P CR2E034 (11/05)

City & State

Stuart FL
Zip **34997** Country **USA**

City & State

Stuart FL
Zip **34997** Country **USA**

4. FEI Number
59-2722677

Applied For
Not Applicable

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**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

7810 S.E. River Lane

City

Stuart

FL

Zip Code

34997

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 \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **RICHARDSON, MARSHALL P.**
STREET ADDRESS **6982 COUNTRY PLACE ROAD**
CITY-ST-ZIP **WEST PALM BEACH, FL**

TITLE **VTS** ☐ Delete
NAME **RICHARDSON, MARSHALL P.**
STREET ADDRESS **6982 COUNTRY PLACE RD.**
CITY-ST-ZIP **WEST PALM BEACH, FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **7810 S.E. River Lane**
CITY-ST-ZIP **Stuart, FL 34997**

TITLE ☐ Change ☐ Addition
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STREET ADDRESS **7810 S.E. River Lane**
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

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

3-23-06

Date

(772) 286-8103

Daytime Phone #