

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122938

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** ADVANCED FIRE EXTINGUISHERS & SAFETY EQUIPMENT, LLC

**Current Principal Place of Business:**

4189 DAIRY CT.  
STE. F  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

**Current Mailing Address:**

4189 DAIRY CT.  
STE. F  
PORT ORANGE, FL 32127 US

**New Mailing Address:**

FEI Number: 33-1193893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

K. REID, CPA, INC.  
3890 TURTLE CREEK DRIVE  
SUITE B  
PORT ORANGE, FL 32127 US

**Name and Address of New Registered Agent:**

GAINES, EILEEN R  
4189 DAIRY COURT  
F  
PORT ORANGE, FL 32127 US

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.

SIGNATURE: EILEEN R. GAINES

03/21/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GAINES, KENNETH  
Address: 4189 DAIRY COURT STE. F  
City-St-Zip: PORT ORANGE, FL 32127 US

Title: MGR  
Name: GAINES, EILEEN R  
Address: 4189 DAIRY CT. STE. F  
City-St-Zip: PORT ORANGE, FL 32127

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EILEEN R. GAINES

MGR

03/21/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date