

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000049593

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** ST. PETERSBURG FIRE PROTECTION, LLC

**Current Principal Place of Business:**

844 20TH AVENUE, NORTH  
ST. PETERSBURG, FL 33704

**New Principal Place of Business:**

**Current Mailing Address:**

204 37TH AVENUE, NORTH  
#363  
ST. PETERSBURG, FL 33704

**New Mailing Address:**

**FEI Number:** 27-2528286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SAULTS, NANCY  
844 20TH AVENUE, NORTH  
ST. PETERSBURG, FL 33704 US

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

SAULTS, NANCY S  
844 20TH AVENUE, NORTH  
ST. PETERSBURG, FL 33704 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:** NANCY SUZANNE SAULTS

04/14/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SAULTS, NANCY S  
**Address:** 204 37TH AVENUE, NORTH  
**City-St-Zip:** ST. PETERSBURG, FL 33704

**Title:** MGRM  
**Name:** DYCE, GEOFF  
**Address:** 204 37TH AVENUE, NORTH  
**City-St-Zip:** ST. PETERSBURG, FL 33704

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:** NANCY SUZANNE SAULTS

MGRM

04/14/2011

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