


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # N03000008321 1. Entity Name FIRESTARTERS OF FLORIDA, INC.		
Principal Place of Business 3131 NE 11TH AVENUE POMPANO BEACH, FL 33064	Mailing Address 3131 NE 11TH AVENUE POMPANO BEACH, FL 33064	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ANDERHOLM-WEST, KAREN 3131 NE 11TH AVENUE POMPANO BEACH, FL 33064		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when revalidating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDERHOLM-WEST, KAREN 3131 NE 11TH AVE NUE POMPANO BEACH, FL 33064	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WEST, JAMES 3131 NE 11TH AVE NUE POMPANO BEACH, FL 33064	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CORDLE, SUNNY 230 GREY STONE RD SHEFFIELD, ENGLAD, 3117br	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DURRANCE, CRAIG 7561 PIONEER RD WEST PALM BEACH, FL 33413	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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 617, 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: <i>Karen Andholm-West</i> KAREN ANDERHOLM-WEST 4/4/08 561-315-8641 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



01102008 No Chg-NP CR2E037 (4/06)

4. FEI Number 90-0116014	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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04/16/08-80070-023 61.25

**DO NOT WRITE
IN THIS SPACE**