## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000001346

Title:

Name:

Address: City-St-Zip:

Entity Name: FLORIDA SPECIAL RESPONSE TEAM-A, INC.

FILED May 07, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5933 W HILLSBORO BLVD **SUITE #155** PARKLAND, FL 33076 **New Mailing Address: Current Mailing Address:** 5933 W HILLSBORO BLVD **SUITE #155** PARKLAND, FL 33076 US FEI Number: 65-0659159 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FORSYTHE, JODY 5933 WEST HILLSBORO BLVD SUITE 155 PARKLAND, FL 33076 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WOLFF, EDWARD C Name: Name: Address: 5933 W HILLSBORO BLVD #155 Address: City-St-Zip: PARKLAND, FL 33076 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MARSHALL, JAMES Name: Address: 5933 W HILLSBORO BLVD #155 Address: City-St-Zip: PARKLAND, FL 33076 US City-St-Zip: Title: () Delete Title: () Change () Addition PRAISLER, DAVID Name: Name: 5933 W HILLSBORO BLVD #155 Address: Address: City-St-Zip: PARKLAND, FL 33076 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MAULINI, RICARDO Name: 5933 W HILLSBORO BLVD #155 Address: Address: City-St-Zip: PARKLAND, FL 33076 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD C. WOLFF P 05/07/2004

() Delete

5933 W HILLSBORO BLVD #155

PARKLAND, FL 33076 US

L'HERROU, TODD

() Change () Addition