2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002005

Entity Name: FIRE INTERNATIONAL, INC.

FILED Feb 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4000 W FAIRFIELD DRIVE 745 CABARRUS AVE W. PENSACOLA, FL 32505

SUITE 240

CONCORD, NC 28027

Current Mailing Address: New Mailing Address:

PO BOX 36156 P.O. BOX 187

PENSACOLA, FL 32516 HARRISBURG, NC 28075

FEI Number: 59-3563742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PETERS, WILLIAM (JOSH) E DR WELLS, JAMES

4118 ERÍKA CT 4006 EMBERS LANDING PENSACOLA, FL 32526 PENSACOLA, FL 32505

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: JAMES WELLS 02/12/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BROWN, MICHAEL L DR BROWN, MICHAEL L DR Name: Name:

Address: 20254 SWEET WATER LOOP Address: 10654 TIGERTON LN City-St-Zip: SEMINOLE, AL 36574 City-St-Zip: CHARLOTTE, NC 28269

Title: Title: (X) Change () Addition () Delete Name: PETERS, WILLIAM (JOSH) E Name: PETERS, WILLIAM (JOSH) E DR Address: Address:

4118 ERIKA CT 417 PARALLEL DRIVE City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: HARRISBURG, NC 28075

Title: () Delete Title: () Change () Addition

CAVA, M JOHN Name: Name: 32210 BARTEL ST Address: Address: City-St-Zip: ELBERTA, AL 32530 City-St-Zip:

() Delete Title: Title: (X) Change () Addition Name: GLADSTONE, ROBERT J Name: GLADSTONE, ROBERT J

7185 RAMPART WAY 3701 PATRIOTS PLACE DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32576 City-St-Zip: CONCORD, NC 28025

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.

SIGNATURE: DR. WILLIAM E. (JOSH) PETERS VP 02/12/2004