

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 13, 2007  
Secretary of State**

DOCUMENT# N99000002005

Entity Name: FIRE INTERNATIONAL, INC.

**Current Principal Place of Business:**

745 CABARRUS AVE W.  
SUITE 240  
CONCORD, NC 28027

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 187  
HARRISBURG, NC 28075

**New Mailing Address:**

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

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

WELLS, JAMES  
4006 EMBERS LANDING  
PENSACOLA, FL 32505      US

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

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:**

Title: P      ( ) Delete  
Name: BROWN, MICHAEL L DR  
Address: 206 DENNEHY CT  
City-St-Zip: HUNTERSVILLE, NC 28078

Title: VP      ( ) Delete  
Name: PETERS, WILLIAM (JOSH) E DR  
Address: 417 PARALLEL DRIVE  
City-St-Zip: HARRISBURG, NC 28075

Title: D      ( ) Delete  
Name: CAVA, M JOHN  
Address: 4869 RENFREW DR  
City-St-Zip: CONCORD, NC 28027

Title: D      ( ) Delete  
Name: GLADSTONE, ROBERT J  
Address: 98 POPLAR WOODS DR  
City-St-Zip: CONCORD, NC 28027

Title: D      ( ) Delete  
Name: WEAVER, WESLEY J  
Address: 609 DUNDEE DRIVE  
City-St-Zip: PENSACOLA, FL 32507

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      (X) Change ( ) Addition  
Name: PETERS, WILLIAM (JOSH) E DR  
Address: 9152 LOWER ROCKY RIVER RD  
City-St-Zip: CONCORD, NC 28025

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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. PETERS

VP

03/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date