

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000092063

1. Entity Name
FEDERAL SAW AND TOOL COMPANIES
INCORPORATED



Principal Place of Business 5679 70TH AVE. N. PINELLAS PARK, FL 33781	Mailing Address 5679 70TH AVE. N. PINELLAS PARK, FL 33781
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DO NOT WRITE IN THIS SPACE



04272007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3672311	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURKE-GEORGE, FRANCES V
1304 DIXIE LN
S PASADENA, FL 33707

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000741264
05/15/07-80024-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PATRICK GEORGE, DAVID
STREET ADDRESS	1304 DIXIE LN
CITY-ST-ZIP	S PASADENA, FL 33707
TITLE	V
NAME	BURKE-GEORGE, FRANCES V
STREET ADDRESS	1304 DIXIE LN
CITY-ST-ZIP	S PASADENA, FL 33707
TITLE	D
NAME	BURKE, ELLIOTT B
STREET ADDRESS	1304 DIXIE LN
CITY-ST-ZIP	S PASADENA, FL 33707
TITLE	D
NAME	GEORGE, QUINN B
STREET ADDRESS	1304 DIXIE LN
CITY-ST-ZIP	S PASADENA, FL 33707
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 607, 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 firms empowered.

SIGNATURE: _____ Date: 4-27-07 Daytime Phone #: 727-526-0127

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR