

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000099568

**FILED**  
**Aug 17, 2010**  
**Secretary of State**

**Entity Name:** POWELL FIRE SPRINKLERS SYSTEMS INC.

**Current Principal Place of Business:**

1243 N. PINE HILLS ROAD  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 555184  
ORLANDO, FL 32808

**New Mailing Address:**

**FEI Number:** 33-1021691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POWELL, LEE  
1243 N. PINE HILLS ROAD  
ORLANDO, FL 32808 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: PD  
Name: POWELL, LEE  
Address: 1243 N. PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: PRES  
Name: POWELL, LEE F  
Address: 1243 N. PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808 US

Title: V.P  
Name: POWELL, DUANE  
Address: 1243 N. PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEE POWELL

PRES

08/17/2010

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

\_\_\_\_\_  
Date