2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2004
Secretary of State

DOCUMENT# P03000046095

Entity Name: ALL FLORIDA FIRE SYSTEMS INC.

Current Principal Place of Business:

PO BOX 4352
TALLAHASSEE, FL 32315

New Principal Place of Business:

Current Mailing Address:

PO BOX 4352
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number: 04-3707769 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIFLET, NOAH J
1811 SALMON DR.
TALLAHASSEE, FL 32303 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHIFLET, NOAH J
Address: 1811 SALMON DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: V ( ) Delete
Name: TRAXIER, THOMAS WILLIAM
Address: 12322 WHITEHOUSE RD
City-St-Zip: TALLAHASSEE, FL 32317

Title: V ( ) Delete
Name: JUSTISS, JAMES B JR
Address: 54 LAKE ELDEW SHORES DR.
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: NOAH J. SHIFLET P 07/13/2004

Electronic Signature of Signing Officer or Director Date