

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046095

Entity Name: ALL FLORIDA FIRE SYSTEMS INC.

FILED  
Apr 14, 2005  
Secretary of State

## 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: 51-0515544

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

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

04/14/2005

Electronic Signature of Signing Officer or Director

Date