2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # P03000130997 Mar 05, 2007 08:00 AV 1. Entity Name **Secretary of State** JERRY HAILEY SPRINKLER'S CORP. Principal Place of Business Mailing Address 1522 BAYBERRY ST. 1522 BAYBERRY ST **BUNNELL FL 32110** BUNNELL FL 32110 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #. etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 90-0124180 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAILEY, JERRY Street Address (P.O. Box Number is Not Acceptable) 1522 BAYBERRY ST. **BUNNELL FL 32110** City Zio Code 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. enry L. Hoiley President (NOTE Hegistered Again signature required when reunslaving) SIGNATURE. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete MILE ☐ Change Addition HAILEY, JERRY NAME NAME 1522 BAYBERRY ST. U00000654304 STREET ADDRESS STREET ADDRESS BUNNELL FL 32110 03/13/07-80057-005 150.00 CITY ST ZIP CITY ST ZIP SECR IITLE mu -Delete ☐ Change ☐ Addition HAILEY, ANITA NAME MAME 1522 BAYBERRY ST. STREET ADDRESS STREET ADDRESS BUNNELL FL 32110 CITY - ST - ZIP CITY-ST-ZIP VP TITLE ☐ Delete шu Change ■ Addition HAILEY, BRAD NAME NAME 1522 BAYBERRY ST STREET ADDRESS STREET ADDRESS **BUNNELL FL 32110** CHY ST 78 CRY-SI-78P ☐ Delele IIILE IIILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY SI ZIP CITY-ST ZIP ☐ Delete ☐ Change TITLE IHLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-718 CITY - ST - ZIP IIIU ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CITY ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 rustee 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 like empowered.

ORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

PreisDeat Jerry L. Hailey 7-1-07 (386586-51)