

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 08, 2008 08:00 A
Secretary of State

DOCUMENT # P05000086598

1. Entity Name
BENNETT FIRE PROTECTION, INC.



Principal Place of Business

77 ALMERIA STREET
ST AUGUSTINE, FL 32084

Mailing Address

77 ALMERIA STREET
ST AUGUSTINE, FL 32084



03072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3092303

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, CHARLES E
77 ALMERIA STREET
ST AUGUSTINE, FL 32084

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000886505
04/18/08-80060-008 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DPT
BENNETT, ROBERT D
644 HUBERT BLVD
HUBERT, NC 28539

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DVS
BENNETT, TAMMY S
644 HUBERT BLVD
HUBERT, NC 28539

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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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 like empowered.

SIGNATURE: TAMMY S. BENNETT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-08
Date

910-389-4717
Daytime Phone #