

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90025 028 ***150.00

DOCUMENT # P06000002649

1. Entity Name
FIRE EQUIPMENT SERVICES OF EAST COAST, INC.



Principal Place of Business
434 NORTH SEVENTH STREET
FORT PIERCE, FL 34950 US

Mailing Address
434 NORTH SEVENTH STREET
FORT PIERCE, FL 34950 US

2. Principal Place of Business - No P.O. Box #
873 So. Kings Highway
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.



03272008 Chg-P CR2E034 (12/06)

City & State
Ft. Pierce, FL
Zip 34945 Country US

City & State
Zip Country

4. FEI Number
87-0767901
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOLBRECHT, MELVIN T JR.
434 NORTH SEVENTH STREET
FORT PIERCE, FL 34950

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip 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.

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME FOLBRECHT, MELVIN T JR.
STREET ADDRESS 434 NORTH SEVENTH STREET
CITY-ST-ZIP FORT PIERCE, FL 34950 ☐ Delete

TITLE S/T
NAME FOLBRECHT, LUCY A
STREET ADDRESS 434 NORTH SEVENTH STREET
CITY-ST-ZIP FORT PIERCE, FL 34950 ☐ Delete

TITLE VP
NAME KIMMEN, WILLIAM
STREET ADDRESS 434 NORTH SEVENTH STREET
CITY-ST-ZIP FORT PIERCE, FL 34950 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME William Kimmen
STREET ADDRESS 873 So. Kings Highway
CITY-ST-ZIP Ft. Pierce, FL 34945 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MEL FOLBRECHT, JR

Date

Daytime Phone #

3-28-08

772-

461-6845