2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # P06000020910 1. Entity Name UNION FIRE INC. Principal Place of Business 475 SOUTH CHICKASAW TRAIL ANNUAL REPORT Mailing Address 475 SOUTH CHICKASAW TRAIL

FILED May 05, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

ORLANDO, FL 32825

04292008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For O2-0768486

 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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6. Name and Address of Current Registered Agent			1. 1. 1. 1. 1.	196 vi			
EL-HAWARY, AHMED 475 SOUTH CHICKASAW TRAIL ORLANO, FL 32825 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 fan the obligations of registered agent. SIGNATURE Signature, typed or protect name of registered agent and tall of applicable. (NOTE: Registered Agent spristure required when renations) OATE						ACE rida. Tam familiar w	ith, and accept
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution				.00 May Be ed to Fees	***		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY+ST+ZIP	P EL-HAWARY, AHMED 475 SOUTH CHICKASAW TRAIL ORLANDO, FL 32825				000000 -06/02/08	947951 80034-025	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. Thereby 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							

12. Thereby certify that the information supplied with this filling does not quality 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:

ORLANDO, FL 32825

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFI

Ahmed El-Hawary

4/29/08

407-844-554