## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000071477

Entity Name: GC FIRE PROTECTION SERVICES, INC.

FILED Jul 09, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3400 AGRICULTTURAL CENTER DRIVE ST AUGUSTINE, FL 32092 **Current Mailing Address: New Mailing Address:** 3400 AGRICULTTURAL CENTER DRIVE ST AUGUSTINE, FL 32092 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. AVERY, RONALD 1840 SW 22ND ST. 3400 AĞRICULTURAL CENTER DRIVE 4TH FLOOR SAINT AUGUSTINE, FL 32092 MIAMI, FL 33145 US 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: RONALD AVERY 07/09/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition AVERY, RONALD Name: Name: 3400 AGRICULTTURAL CENTER DRIVE Address: Address: City-St-Zip: ST AUGUSTINE, FL 32092 City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: REESE. WALTER Name: 3400 AGRICULTTURAL CENTER DRIVE Address: Address: ST AUGUSTINE, FL 32092 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: DS () Change () Addition KRALL, JOSEPH Name: Name: 3400 AGRICULTTURAL CENTER DRIVE Address: Address: City-St-Zip: ST AUGUSTINE, FL 32092 City-St-Zip: Title: DT () Delete Title: () Change () Addition DEWITT, JAMES Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: JOSEPH P KRALL 07/09/2007 S

3400 AGRICULTTURAL CENTER DRIVE

ST AUGUSTINE, FL 32092

Address:

City-St-Zip: