

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107255

Entity Name: TRI SAFETY, INC.

FILED  
Jul 08, 2008  
Secretary of State

## Current Principal Place of Business:

1908 SCARLETT BLVD.  
LYNN HAVEN, FL 32444 US

## New Principal Place of Business:

## Current Mailing Address:

1908 SCARLETT BLVD.  
LYNN HAVEN, FL 32444 US

## New Mailing Address:

3064 OLD CABIN LANE SE  
SMYRNA, GA 30080 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIEL, JENNIFER  
1908 SCARLETT BLVD.  
LYNN HAVEN, FL 32444 US

## Name and Address of New Registered Agent:

LAINE, JENNIFER  
1559 HIGHWAY 389  
LYNN HAVEN, FL 324442903 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: JENNIFER LAINE

07/08/2008

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:

Title: P ( ) Delete  
Name: KIEL, JENNIFER  
Address: 1908 SCARLETT BLVD.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: S ( ) Delete  
Name: LAINE, PATRICK  
Address: 1908 SCARLETT BLVD.  
City-St-Zip: LYNN HAVEN, FL 32444 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LAINE, JENNIFER  
Address: 1908 SCARLETT BLVD.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: S (X) Change ( ) Addition  
Name: LAINE, JENNIFER  
Address: 1908 SCARLETT BLVD.  
City-St-Zip: LYNN HAVEN, FL 32444 US

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.

SIGNATURE: JENNIFER LAINE

P

07/08/2008

Electronic Signature of Signing Officer or Director

Date