

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000137438

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** AAA FIRE PROTECTION SERVICES, INC.

**Current Principal Place of Business:**

8502 SUNSTATE ST.  
TAMPA, FL 33634

**New Principal Place of Business:**

**Current Mailing Address:**

8502 SUNSTATE ST.  
TAMPA, FL 33634

**New Mailing Address:**

**FEI Number:** 20-5825530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SWENSON, FREDERICK T  
1418 WILLIAMS RD  
LUTZ, FL 33558 US

**Name and Address of New Registered Agent:**

SWENSON, FREDERICK T PD  
1418 WILLIAMS RD  
LUTZ, FL 33558 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:** FREDERICK T. SWENSON

01/08/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SWENSON, FREDERICK T  
**Address:** 1418 WILLIAMS RD  
**City-St-Zip:** LUTZ, FL 33558

**Title:** VPST  
**Name:** SWENSON, DONNA E  
**Address:** 1418 WILLIAMS RD  
**City-St-Zip:** LUTZ, FL 33558

**Title:** VP  
**Name:** DUPREE, JAMES M  
**Address:** 1019 WILDROSE DR  
**City-St-Zip:** LUTZ, FL 33549

I hereby 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 all other like empowered.

**SIGNATURE:** FREDERICK T. SWENSON

PD

01/08/2010

Electronic Signature of Signing Officer or Director

Date