

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 23, 2008 8:00 am
Secretary of State

05-30-2008 90217 039 ***558.75

DOCUMENT # P07000116499 1. Entity Name SPRINKLER MAINTENANCE, INC.																													
Principal Place of Business 5145 ENGLEWOOD LANE ZEPHYRHILLS FL 33541 US				Mailing Address 5145 ENGLEWOOD LANE ZEPHYRHILLS FL 33541 US																									
2. Principal Place of Business - No P.O. Box # 5145 ENGLEWOOD LANE		3. Mailing Address SAME																											
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																											
City & State ZEPHYRHILLS FL		City & State ZEPHYRHILLS FL		4. FEI Number 261305238																									
Zip 33541		Country PASCO		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent CARPENTER, MARK C 5145 ENGLEWOOD LANE ZEPHYRHILLS FL 33541				7. Name and Address of New Registered Agent Name MARK C. CARPENTER Street Address (P.O. Box Number is Not Acceptable) 5145 ENGLEWOOD LANE City ENGLEWOOD ZEPHYRHILLS FL Zip Code 33617																									
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 <i>Mark C. Carpenter SR.</i> DATE _____ Signature typed or printed name of registered agent and title is acceptable. (NOTE: Registered Agent signature required when reappointing)																													
FILE NOW!!! FEE IS \$150.00 --- After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>CARPENTER, MARK C</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5145 ENGLEWOOD LANE</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>ZEPHYRHILLS FL 33541</td> <td></td> </tr> </table>			TITLE	P	☐ Delete	NAME	CARPENTER, MARK C		STREET ADDRESS	5145 ENGLEWOOD LANE		CITY- ST- ZIP	ZEPHYRHILLS FL 33541		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 30%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <i>Mark C. Carpenter SR.</i> 6-18-8 813-671-9502 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													
MARK C. CARPENTER																													