

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000052581

FILED
Feb 01, 2013
Secretary of State

Entity Name: STAR FIRE SPRINKLERS, INC.

Current Principal Place of Business:

STAR FIRE SPRINKLERS, INC.
5115 BLAND RD
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

STAR FIRE SPRINKLERS, INC.
5115 BLAND RD
JACKSONVILLE, FL 32254

New Mailing Address:

STAR FIRE SPRINKLERS, INC.
P O BOX 61425
JACKSONVILLE, FL 32236

FEI Number: 26-2650236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JOSEPH R
5115 BLAND RD
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

TITTLE, STARLENE A
15642 CR 108
JACKSONVILLE, FL 32046 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: STARLENE TITTLE

02/01/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: TITTLE, STARLENE A
Address: 15642 CR 108
City-St-Zip: HILLIARD, FL 32046

Title: S
Name: THOMAS, JOSEPH R
Address: 5115 BLAND RD.
City-St-Zip: JACKSONVILLE, FL 32254

Title: V
Name: CRAFT, ANTHONY
Address: 8290 SW 80TH AVE.
City-St-Zip: TRENTON, FL 32693

Title: V
Name: TITTLE, SHAWN D
Address: 15130 BAREBACK DR.
City-St-Zip: JACKSONVILLE, FL 32234

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: STARLENE TITTLE

P

02/01/2013

Electronic Signature of Signing Officer or Director

Date