

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16819

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** BENNETT'S FIRE PROTECTION SYSTEMS, INC.

**Current Principal Place of Business:**

111 MAIN STREET  
LAKE PARK, GA 31636 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 335  
LAKE PARK, GA 31636 US

**New Mailing Address:**

**FEI Number:** 58-1744050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENNETT, GARY L.  
1550 MCCALL STREET  
JENNINGS, FL 32053 US

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

BENNETT, GARY L.  
550 MCCALL STREET  
JENNINGS, FL 32053 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: GARY L. BENNETT

03/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BENNETT, GARY L.  
Address: 550 MCCALL STREET  
City-St-Zip: JENNINGS, FL 32053

Title: STD  
Name: BENNETT, MARY L.  
Address: 5257 SADDLEBAGS RD.  
City-St-Zip: LAKE PARK, GA 31636

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: GARY L. BENNETT

P

03/09/2012

Electronic Signature of Signing Officer or Director

Date