## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000033231

Entity Name: FIRE SPRINKLER SERVICES, INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	BERO ROAD IVILLE, FL 3221	1 US			
Current Mailing Address:			New Mailing Address:		
P.O. BOX JACKSON	11171 IVILLE, FL 32239	9 US			
FEI Number	: 59-3183861	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address o	f New Registered Agent:	
50 N. LAU	ONEY E SKINNE IRA ST., STE 33 IVILLE, FL 32202	00			
	e named entity su e of Florida.	bmits this statement for th	ne purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electronic	Signature of Registered	Agent	Date	
Election Car	mpaign Financing T	rust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () D MATTHEWS, ROE 13904 SHIPWRE JACKSONVILLE,	BERT F III CK CIRCLE SOUTH	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () D MICKLER, JUDD 55690 YELLOW J CALLAHAN, FL 3	P IACKET DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () D AILSTOCK, DAVID 8545 ACREE ROA JACKSONVILLE,	D D AD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D MATTHEWS, THO 2673 PRIMROSE MIDDLEBURG, FI	MAS E CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDD P. MICKLER T 04/24/2007