## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000044394

Entity Name: ANDERSON FIRE SPRINKLERS, INC.

FILED Jul 07, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

311 ALTAMONTE COMMERCE BLVD. 311 ALTAMONTE COMMERCE BLVD.

STE 1608 SUITE 1608

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

309 SWEETWATER CLUB CR LONGWOOD, FL 32779 US 309 SWEETWATER CLUB CIRCLE LONGWOOD, FL 32779 US

FEI Number: 59-3189867 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ANDERSON, KATHLEEN S
309 SWEETWATER CLUB CIR
LONGWOOD, FL 32779 US
ANDERSON, KATHLEEN S
309 SWEETWATER CLUB CIRCLE
LONGWOOD, FL 32779 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: KATHLEEN S. ANDERSON 07/07/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDERSON, KATHLEEN S
 Name:

 Address:
 309 SWEETWATER CLUB CIRCLE
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 ANDERSON, GREGORY G
 Name:

 Address:
 309 SWEETWATER CLUB CIRCLE
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHLEEN S. ANDERSON DVST 07/07/2004