## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000027255 (6)

TAYLOR FIRE PROTECTION, INC.

Principal Place of Business

Mailing Address

8007 COTH AVENUE SOUTH ST. PETERSBURG FL 33712 - 2007-66TH AVENUE SOUTH ST. PETERSBURG FL 33712-5852

## FILED Apr 30 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified 04/07/1994	1	nte of Last R 1 <b>0/1996</b>	·	
2. Principal Place of Business 2a. Mailing Address			AME.	5		4. FEI Number		Applied For		
				/ <u>L</u>		59-3235408		Not Applicable		
Sulte, Apt.				5. Certificate of Status Desired		\$8.75 / Fee Re				
City & State				<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>		\$5.00 Added				
Zip	Country	Zip	Cour	itry		B. This corporation has liability for i			199.032,	
24 337/4 25 NSH 29 30 30 30					Florida Statutes Yes No					
	<del></del>	t Registered Agent		81 Name		10. Name and Address of New Re	gistered	Agent		
	OR, TIMOTHY		1	81 Name						
2097 66TH AVENUE SOUTH ST. PETERSBURG FL 33712					Street Address (P.O. Box Number is Not Acceptable)					
ST. F	-	B3								
			}	84 City				<b>85</b> Zip (	Code	
				Only			FL		Jour	
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligations.	of Florida. Such change w	as authorized	by the cor	corpor poration	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of ot the app	changing it ointment as	s registered registered	
SIGNATURE	Signature typed or printed name of registered age	eg and title d applicable /	(NOTE: Registered	Agent signature	e required	whon reinstating)	DATE			
12.	OFFICERS AN		18.			ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTOR	RS IN 12	
TITLE	D	DITETE	1.1 T/I	.E				Change	Addition	
NAME	TAYLOR, TIMOTHY		1.2 NA	<b>M</b> E						
STREET ADDRESS	2097 66TH AVENUE SOUTH		1.3 ST	EE1 ADDRESS	İ					
CITY-ST-ZIP	ST. PETERSBURG FL 33712		14 C/T	Y-S1-ZIP						
TITLE		DELETE	21 TA	.f				Change	Addition	
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NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 STF	EET ADDRESS						
CITY-ST-ZIP				Y - \$1 - ZIP	ļ					
TITLE		☐ DELETE	5 1 TAT	.É	1			Change	☐ Addition	
NAME			5.2 NAI	ME						
STREET ADDRESS			5.3 \$16	REET ADDRESS						
CITY-ST-ZIP			5.4 CI1	Y - ST - ZIP				T		
TITLE		☐ DELETE	6.1 111	.F				☐ Change	Addition	
NAME			6.2 NAI	MΓ						
STREET ADDRESS			6.3 \$11	REFT ADDRESS						
CITY-ST-ZIP				Y-S1-ZIP	<u> </u>					
informatio	on indicated on this annual report or s	supplemental ånnual report	is true and a nowered to ex	ccurate and	d that m	n Section 119.07(3)(i), Florida Statute ny signature shall have the same lega as required by Chapter 607, Florida S	l effect as	if made un	der oath; tha	