

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000055400 (3)

1. Corporation Name

CJ'S FIRE AND SAFETY EQUIPMENT, INC.



Principal Place of Business

3611 34TH ST. EAST  
BRADENTON FL 34208

Mailing Address

3611 34TH ST. EAST  
BRADENTON FL 34208

2. Principal Place of Business

21 5550 15 ST E

Suite, Apt. #, etc.

22 518 A2

City & State

23 Bradenton FL

Zip

24 34203

Country

25 USA

2a. Mailing Address

26 PO Box 20815

Suite, Apt. #, etc.

27

City & State

28 Bradenton FL

Zip

29 34203

Country

30 Manatee

9. Name and Address of Current Registered Agent

ELLIS, STEPHEN F  
1800 SECOND STREET  
SUITE 806  
SARASOTA FL 34236

3. Date Incorporated or Qualified

07/25/1994

3a. Date of Last Report

04/17/1995

4. FEI Number

65-0501040

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent to fill in if applicable

(If not, Registered Agent signature required when not applicable)

DATE

12. OFFICERS AND DIRECTORS

|                 |   |                        |                                 |
|-----------------|---|------------------------|---------------------------------|
| TITLE           | D | THAYER, CLARENCE E JR. | <input type="checkbox"/> DELETE |
| NAME            |   | 3611 34TH ST. EAST     |                                 |
| STREET ADDRESS  |   | BRADENTON FL 34208     |                                 |
| CITY - ST - ZIP |   |                        |                                 |
| TITLE           | D | THAYER, CINDY A        | <input type="checkbox"/> DELETE |
| NAME            |   | 3611 34TH ST. EAST     |                                 |
| STREET ADDRESS  |   | BRADENTON FL 34208     |                                 |
| CITY - ST - ZIP |   |                        |                                 |
| TITLE           |   |                        | <input type="checkbox"/> DELETE |
| NAME            |   |                        |                                 |
| STREET ADDRESS  |   |                        |                                 |
| CITY - ST - ZIP |   |                        |                                 |
| TITLE           |   |                        | <input type="checkbox"/> DELETE |
| NAME            |   |                        |                                 |
| STREET ADDRESS  |   |                        |                                 |
| CITY - ST - ZIP |   |                        |                                 |
| TITLE           |   |                        | <input type="checkbox"/> DELETE |
| NAME            |   |                        |                                 |
| STREET ADDRESS  |   |                        |                                 |
| CITY - ST - ZIP |   |                        |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                                                                   |
|---------------------|-------------------------------------------------------------------|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            |                                                                   |
| 1.3 STREET ADDRESS  |                                                                   |
| 1.4 CITY - ST - ZIP |                                                                   |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            |                                                                   |
| 2.3 STREET ADDRESS  |                                                                   |
| 2.4 CITY - ST - ZIP |                                                                   |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |                                                                   |
| 3.3 STREET ADDRESS  |                                                                   |
| 3.4 CITY - ST - ZIP |                                                                   |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |                                                                   |
| 4.3 STREET ADDRESS  |                                                                   |
| 4.4 CITY - ST - ZIP |                                                                   |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |                                                                   |
| 5.3 STREET ADDRESS  |                                                                   |
| 5.4 CITY - ST - ZIP |                                                                   |
| 6.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME            |                                                                   |
| 6.3 STREET ADDRESS  |                                                                   |
| 6.4 CITY - ST - ZIP |                                                                   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Cindy Thayer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96

756-4322

CR2E034 (12/95)