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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000055401

1. Corporation Name

TANNASSEE FIRE PROTECTION, INC.

Principal Place of Business 4626 31ST AVE SW

Mailing Address

4626 31ST AVE SW

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90071 043 ***150.00



NAPLES FL 33999 		NAPLES FL 33999		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			=
					06/27/1996			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26 P.O. BOX 11	1,23		59-3389075		No	t Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	400		<u> </u>		8.75 A	dditional
22		27			5. Certifcate of Status Desired		Fee Re	quired
City & State	2	City & State	مريد - دننه - د		- 6Election Campaign Financing	رت وجيدي	\$5.00-	May Be —~
23		28 Naples 1			Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current y	ear Intangi	ble	
24	25	29 34101 30] USA	A	Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regis	tered Age	nt	_
				81 Name				
tannassee, kenneth r sr			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
4626	31ST AVE SW		"	Ourcet Addit	COS (1.0. Box Manner to Morrisospherio)			
Napl	ES FL 33999		83					_
				<u> </u>			F 30. 4	Sedo.
			84	City	•	FL	5 Zip C	700e
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								
office or re	egistered agent, or both, in the State of	Florida. Such change was authorida.	orized by	the corporatio	n's board of directors. I hereby accept the	appointme	ent as req	gistered
agent. I ar	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes	١.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Rec	nistered Anei	nt signature required	(when reinstating)	ATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND D	IRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE				Change	Addition
NAME	TANNASSEE, KENNETH R SR		1.2 NAME	ı				
STREET ADDRESS	4626 31ST AVE SW		13 STDEE	T ADDRESS				
	NAPLES FL 33999		1.4 CITY-S		_			
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 TITLE	11-211		Т	Change	☐ Addition
	SARGERT, LAUREL J		2.2 NAME				-	_
NAME	4626 31ST AVE SW			TADORESS				
STREET ADDRESS				1				
CITY-ST-ZIP	NAPLES FL 33999	D.DELETE	2. 4 CITY-8 -3.1:TITLE	51-ZIP			Change .	Addition
TITLE:		54.24. <u></u>			and the second s			
NAME			3.2 NAME	T D. O. D. C. C.				
STREET ADDRESS	•			TADORESS				
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	177.54.00		Change	☐ Addition
TITLE		☐ DELETE	4.1 TITLE				Juanye	
NAME			4, 2 NAME					
STREET ADDRESS	11 9.5		4.3 STREE	T ADDRESS				
CITY-ST-ZIP	Mary Carlot Free Lands		4.4 CITY-S	ST-ZIP			Ob ====	- A - 1-12 -
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition Addition
NAME			6.2 NAME					
STREET ADORESS			6.3 STREE	T ADDRESS				
C/TY-ST-ZIP		, ,54	6.4 CITY-S	ST-ZIP				
	pertify that the information symplied with	this filing does not qualify for the	e exempt	ion stated in S	Section 119.07(3)(i). Florida Statutes, I furt	ner certify	hat the i	nformation

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Holida Statutes. I notice 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, with all other like empowered.