

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010229

FILED
Feb 03, 2005
Secretary of State

Entity Name: CENTURY FIRE PROTECTION, INC.

Current Principal Place of Business:

1135 S PASADENA AVE
107
SAINT PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

4201 POINSETTIA DR.
ST. PETE BEACH, FL 33706

New Mailing Address:

1135 S. PASADENA AVENUE
SUITE 107
ST. PETERSBURG, FL 33707

FEI Number: 59-3435007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VILLARI, JOE
4201 POINSETTIA DR.
ST. PETE BEACH, FL 33706 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: VILLARI, MONICA
Address: 4201 POINSETTIA DR.
City-St-Zip: ST. PETE BEACH, FL 33706

Title: P () Delete
Name: VILLARI, JOE
Address: 4201 POINSETTIA DR.
City-St-Zip: ST. PETE BEACH, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOE VILLARI

PRES

02/03/2005

Electronic Signature of Signing Officer or Director

Date