

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000013663

1. Entity Name
SPRINKLERS USA, INC.

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90057 031 ***163.75

Principal Place of Business

**1300 NORTH COCOA BLVD.
SUITE C
COCOA FL 32922**

Mailing Address

**1300 NORTH COCOA BLVD.
SUITE C
COCOA FL 32922**

00026370



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1300 N. COCOA BLVD.
Suite, Apt. #, etc.
C

3. Mailing Address

1300 N. COCOA BLVD.
Suite, Apt. #, etc.
C

City & State

COCOA, FL.

City & State

COCOA, FL.

4. FEI Number

59-3436309

Applied For

Not Applicable

Zip

Country

32922

USA

Zip

Country

32922

USA

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STANTON, LINDA I
3815 N US 1
SUITE 5
COCOA FL 32927**

Name

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

City

FL

Zip Code

8. 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

Linda I. Stanton / Joseph, Pres.

3/16/01

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.



\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	STANTON, LINDA I	
STREET ADDRESS	3815 N US 1 SUITE 5	
CITY-ST-ZIP	COCOA FL 32927	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda I. Stanton / Joseph, Pres.

Date

Daytime Phone #

3/16/01 321-631-8133

CR2E034 (10/00)