

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000018653

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: TOTAL LIFESAFETY CORPORATION

## Current Principal Place of Business:

1045 NE INDUSTRIAL BLVD.  
JENSEN BEACH, FL 34957

## New Principal Place of Business:

## Current Mailing Address:

1045 NE INDUSTRIAL BLVD.  
JENSEN BEACH, FL 34957

## New Mailing Address:

FEI Number: 59-3546643

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLHEMUS, BRYAN W  
1384 COCONUT POINT  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

POLHEMUS, JOHN W  
1601 SE ST LUCIE BLVD  
STUART, FL 34996 US

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: JOHN W POLHEMUS

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: POLHEMUS, JOHN W  
Address: 1045 NE INDUSTRIAL BLVD.  
City-St-Zip: JENSEN BEACH, FL 34957

Title: P (X) Delete  
Name: POLHEMUS, BRYAN W  
Address: 1045 NE INDUSTRIAL BLVD.  
City-St-Zip: JENSEN BEACH, FL 34957

Title: S ( ) Delete  
Name: POLHEMUS, DIANE  
Address: 1045 NE INDUSTRIAL BLVD  
City-St-Zip: JENSEN BEACH, FL 34957

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 exemption stated in Chapter 119, 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: JOHN W POLHEMUS

C

04/29/2008

Electronic Signature of Signing Officer or Director

Date