

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000048245

**FILED
Apr 06, 2009
Secretary of State**

Entity Name: ABC FIRE EQUIPMENT CORPORATION

Current Principal Place of Business:

5370 JAEGER ROAD
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

5370 JAEGER ROAD
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-3451741 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JACOBS, TODD
2620 66TH STREET SW
NAPLES, FL 34105 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: V () Delete
Name: DENAE, DOLDE
Address: 2843 COACH HOUSE WAY
City-St-Zip: NAPLES, FL 34105

Title: SD () Delete
Name: DOLDE, WILLIAM
Address: 2843 COACH HOUSE WAY
City-St-Zip: NAPLES, FL 34105 US

Title: PD () Delete
Name: JACOBS, TODD
Address: 2620 66TH STREET SW
City-St-Zip: NAPLES, FL 34105

Title: TD () Delete
Name: JACOBS, DONALD
Address: 2355 ALEXANDER PALM DR
City-St-Zip: NAPLES, FL 34105

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:

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: DENAE DOLDE

V

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date