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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062062 (9)

FLORIDA FIRE POWER, INC.

FILED Apr 24 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address			a toeneder tre feffer teart dater ader anne attie eithe Abit Abite anne eith	1981	
14595 OLIVER STREET 14595 OLIVER STREET							
LARGO FL 33774 LARGO FL 33774					DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified		
					07/16/1997		
2. Principal Place of Business 2a, Mailing Add					4. FEI Number Applied	J For	
21	H ata	26			39-3460533 Not Apr	(
Suite, Apt.	#, 6 1C.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Require		
22 City & Stat	8	City & State				·	
23		28			6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fer		
Zip	Country	Zip	Country	y	B. This corporation owes or has paid the current year Intangit		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curre				10. Name and Address of New Registered Agent		
HARTWELL, NANCY M				Na	Name		
14595 OLIVER STREET			82 Street Add		Street Address (P.O. Box Number is Not Acceptable)		
W	RGO FL 33774			ļ			
			83	1	•		
•			84	Čit	City 85 Zip Code		
		-		<u>L</u>	FL 3 24 3000		
11, Pursuant office or r	to the provisions of Sections 607.050 e giste red agent, or both, in the State	02 and 607.1508, Florida Statute o of Florida. Such change was a	es, the abov uthorized b	e-nar v the	named corporation submits this statement for the purpose of changing its reg he corporation's board of directors. I hereby accept the appointment as regis	jistered stered	
agent. i a	m familiar with, and accept the oblig	jations of, Section 607.0505, Flo.	rida Statute	S.	, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE	Signature, typod or printed name of registered ag	ou and the disorderable (NC)1	Denistered Ag	ont nine	signature required when reinstating) DATE		
12.		ID DIRECTORS	13.	on sign	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE	PSTD	☐ DELETE	1.1 TITLE			Addition	
NAME	HARTWELL, NANCY M		1.2 NAME				
STREET ADDRESS	The state of the s		1.3 STREET	i addr	DORESS		
CITY-ST-ZIP	LARGO FL 33774		1.4 CITY - S	ST - ZIP	ZIP		
TITLE	VD DELETE		2.1 TITLE		☐ Change ☐	Addition	
NAME	BOWMAN, ROBERT ALLAN		2.2 NAME				
STREET ADDRESS	2313 LYNBROOKE VIEW CO	urt, apt #5	2.3 STREET	i addr	IDRESS		
CITY-ST-ZIP	ORLANDO FL 32822		2. 4 CITY-	ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change L	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE			3.4. CITY - 4.1 TITLE	<u> 51 - ZIP</u>		Addition	
NAME	_		4.1 HILE 4. 2 NAME		Change	, worllori	
STREET ADDRESS			4.2 NAME 4.3 STREET		INDERCS		
CITY-ST-ZIP			4.4 CITY - S				
TITLE	DELETE		5.1 TITLE	21		Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	T ADDR	DORESS		
CITY-ST-ZIP			5.4 CITY~5				
TITLE	····	☐ DELETE	6.1 TITLE			Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	I ADDR	DDRESS		
CITY-ST-ZIP			64 CITY-S	ST - ZIP	ZIP		
	eith that the information supplied v	with this filing does not qualify for	r the evemn	tion:	on stated in Section 119.07(3)(i) Florida Statutes, I further certify that the inform	mation	

indicated on this annual report or supplied with this timing does not quality for the exemption stated in Section 1.19.07(3)(), Florida Statutes, further certify that the informatic 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.

· 不是我们是我们也是我们的人,我们就是我们的人,我们们们也是我们的人,我们们的人,我们就是我们的人,我们们的人,我们们是我们是我们是我们的人,也是我们也是我们

4/15/98