2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P97000096927

Entity Name: SPECIALTY FIRE SUPPRESSION, INC.

Current Principal Place of Business:

900 SE 1ST STREET
STE 1
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 66
BOYNTON BEACH, FL 33425 US

New Mailing Address:

FEI Number: 65-0799502 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MELEAR, CLIFF
4334 POLO VERDE DR
BOYNTON BEACH, FL 33436 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: D ( ) Delete
Name: MELEAR, RICHARD A
Address: 556 SW 23 TER
City-St-Zip: BOYNTON BEACH, FL 33435

Title: STD ( ) Delete
Name: MELEAR, CLIFF
Address: 4334 PALO VERDE DR.
City-St-Zip: BOYNTON BEACH, FL 33436

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 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: CLIFF MELEAR STD 01/23/2009

Electronic Signature of Signing Officer or Director Date