

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000099525

**FILED**  
**Mar 19, 2011**  
**Secretary of State**

**Entity Name:** FIRE CONTAINMENT SYSTEMS, INC.

**Current Principal Place of Business:**

8740 CYPRESS LAKE DR  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 07157  
FORT MYERS, FL 33919 US

**New Mailing Address:**

**FEI Number:** 65-0794813

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COSTELLO, MARK T  
4617 VILLA CAPRI LANE  
BONITA SPRINGS, FL 34134 US

**Name and Address of New Registered Agent:**

GRAVISS, JENNIFER L  
8740 CYPRESS LAKE DR  
FORT MYERS, FL 33919 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: JENNIFER GRAVISS

03/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: COSTELLO, MARK T  
Address: P.O. BOX 366086  
City-St-Zip: BONITA SPRINGS, FL 341366086

Title: CFO  
Name: GRAVISS, JENNIFER L  
Address: 8740 CYPRESS LAKE DR  
City-St-Zip: FORT MYERS, FL 33919 US

I hereby 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 all other like empowered.

SIGNATURE: JENNIFERGRAVISS

CFO

03/19/2011

Electronic Signature of Signing Officer or Director

Date