

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000009960

FILED
Mar 23, 2007
Secretary of State

Entity Name: RESCUE TRAINING ASSOCIATES INC.

Current Principal Place of Business:

2160 N ANDREWS AVE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

450 NE 9TH AVE
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 65-0810364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLGERSON, JOHN
450 NE 9TH AVE.
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

HOLGERSON, JOHN R CEO
450 NE 9TH AVE.
DEERFIELD BEACH, FL 33441 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 R HOLGERSON

03/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLGERSON, JOHN
Address: 450 NE 9TH AVE.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: HOLGERSON, PAULA
Address: 450 NE 9TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33441

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 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 R HOLGERSON

D

03/23/2007

Electronic Signature of Signing Officer or Director

Date