2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# P99000010805

Entity Name: THE SPRINKLER DOCTOR, INC.

Current Principal Place of Business:

5007 THONOTOSASSA RD
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

PO BOX 293
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 65-1249696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TASCA, ASTRID
5007 THONATOSASSA RD
PLANT CITY, FL 33565 US

Name and Address of New Registered Agent:

TASCA, BRIAN A
5007 THONOTOSASSA RD
PLANT CITY, FL 33565 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: BRIAN A. TASCA 01/22/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: TASCA, BRIAN
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

Title: P ( ) Delete
Name: BATES, AUGUSTINE
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

Title: S ( ) Delete
Name: BATES, JOAN
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

Title: T (X) Delete
Name: TASCA, ASTRID
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V,T (X) Change ( ) Addition
Name: TASCA, BRIAN
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

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: BRIAN A. TASCA V, T 01/22/2009
Electronic Signature of Signing Officer or Director Date