2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2012
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, BRIAN A
5007 THONOTOSASSA RD
PLANT CITY, FL 33565 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

OFFICERS AND DIRECTORS:

Title: P
Name: TASCA, BRIAN
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

Title: V
Name: BATES, AUGUSTINE
Address: 5007 THONOTOSASSA RD
City-St-Zip: PLANT CITY, FL 33565

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: BRIAN TASCA PRES 02/21/2012

Electronic Signature of Signing Officer or Director Date