2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2008 08:00 A Secretary of State **DOCUMENT # P99000070528** BENDER & MODLIN FIRE SPRINKLER, INC. Mailing Address Principal Place of Business 170-G COLLEGE DR 170-G COLLEGE DR **DRANGE PARK, FL. 32065** ORANGE PARK, FL 32065 CR2E034 (11/05) 04082008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3589264 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent DO NOT WRITE MODLIN, TERRY W 3171 DOTHAN ROAD GREEN COVE SPRINGS, FL 32043 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Hongonge P</u>t Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 04/33/08-80012-017 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE MODLIN, TERRY W NAME STREET ADDRESS 3171 DOTHAN ROAD GREEN COVE SPRINGS, FL 32043 CITY-ST-ZIP TITLE BENDER, CHARLES A NAME STREET ADDRESS 3094 MOODY AVE ORANGE PARK, FL 32065 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR