

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097921

FILED
Jan 08, 2009
Secretary of State

Entity Name: TRI-STATE LIFE SAFETY AND ELECTRIC SYSTEMS, INC.

Current Principal Place of Business:

1920 N.W. 120TH TERRACE
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

Current Mailing Address:

540 SNOW HILL CHURCH RD
MURPHY, NC 28906 US

New Mailing Address:

FEI Number: 65-0987693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIPPENHAN, NANCY
1920 N.W. 120TH TERRACE
PEMBROKE PINES, FL 33026 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TEPAS, DONNA G
Address: 1930 COOK BRIDGE RD
City-St-Zip: MURPHY, NC 28906 US

Title: D () Delete
Name: TEPAS, PAUL E
Address: 1930 COOK BRIDGE RD
City-St-Zip: MURPHY, NC 28906

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: TEPAS, DONNA G
Address: 1930 COOK BRIDGE RD
City-St-Zip: MURPHY, NC 28906 US

Title: VPSE (X) Change () Addition
Name: TEPAS, PAUL E
Address: 1930 COOK BRIDGE RD
City-St-Zip: MURPHY, NC 28906

Title: TRES () Change (X) Addition
Name: TEPAS, DONNA G
Address: 1930 COOK BRIDGE RD
City-St-Zip: MURPHY, NC 28906

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: DONNA G TEPAS

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date