2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S32939

FILED Jan 28, 2009 Secretary of State

Entity Name: ASAP - AUTOMATIC SPRINKLERS AND PIPING, INC.

Current Principal Place of Business: New Principal Place of Business:

298-21ST TERRACE S.E. LARGO, FL 33771 US

Current Mailing Address: New Mailing Address:

P.O. BOX 20968 ST PETERSBURG, FL 337420968 US

FEI Number: 59-3058693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAUER, JED C 298 21ST TERR S.E. LARGO, FL 38771 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:

Electronic Signature of Registered Agent Date

0 0

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: STILLWELL, L. J., Name: STILLWELL, L. J.,

 Native
 STIELEWELE, E. N.,

 Address:
 298-21ST TERRACE S.E.

 City-St-Zip:
 LARGO, FL

 298-21ST TERRACE S.E.
 City-St-Zip:

 LARGO, FL
 33771

Title: VD () Delete Title: VD (X) Change () Addition Name: HOFFMAN, DAN, Name: HOFFMAN, DAN,

Name:HOFFMAN, DAN,Name:HOFFMAN, DAN,Address:298-21ST TERRACE S.E.Address:298-21ST TERRACE S.E.City-St-Zip:LARGO, FLCity-St-Zip:LARGO, FL33771

Title: STD () Delete Title: STD (X) Change () Addition

Name: SAUER, JED, Name: SAUER, JED,

 Address:
 298-21ST TERRACE S.E
 Address:
 298-21ST TERRACE S.E

 City-St-Zip:
 LARGO, FL
 City-St-Zip:
 LARGO, FL
 33771

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: LAURA STILLWELL SAUER PRES 01/28/2009