

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S39832

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: MILTON J. WOOD FIRE PROTECTION, INC.

## Current Principal Place of Business:

3805 FAYE ROAD  
JACKSONVILLE, FL 32226

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 26219  
JACKSONVILLE, FL 32226

## New Mailing Address:

FEI Number: 59-3055303

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOOD, MARK S.  
3805 FAYE ROAD  
JACKSONVILLE, FL 32226 US

## Name and Address of New Registered Agent:

WOOD, MARK S.  
3805 FAYE ROAD  
JACKSONVILLE, FL 32226 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: MARK S WOOD

01/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: WOOD, MARK S.  
Address: 3805 FAYE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: S ( ) Delete  
Name: NEMETH, ANNMARIE  
Address: 3805 FAYE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP ( ) Delete  
Name: OGNJENOVIC, ZARKO  
Address: 3805 FAYE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP ( ) Delete  
Name: BOZEMAN, ALBERT  
Address: 3805 FAYE ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: MARK S WOOD

PD

01/10/2007

Electronic Signature of Signing Officer or Director

Date