

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 570098

Entity Name: HAINES CITY FIRE EXTINGUISHER SERVICE, INC.

Current Principal Place of Business:

5860 S.R 544
WINTER HAVEN, FL 33881

Current Mailing Address:

P O BOX 1699
WINTER HAVEN, FL 33882

FEI Number: 59-1853422

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIS, MICHAEL R.
180 OLD SPANISH WAY
WINTER HAVEN, FL 33884 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

Officer/Director Detail :

Title CEO
Name WILLIS, MICHAEL R.
Address 180 OLD SPANISH WAY
City-State-Zip: WINTER HAVEN FL 33884

Title P
Name WILLIS, DONNA
Address 180 OLD SPANISH WAY
City-State-Zip: WINTER HAVEN FL 33884

Title VP
Name WILLIS II, MICHAEL R
Address 209 FRENCHMANS CREEK WAY
City-State-Zip: WINTER HAVEN FL 33884

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: MICHAEL R. WILLIS

C.E.O.

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date