

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000103188

**Entity Name:** SWANSON FIRE PROTECTION INC.

**Current Principal Place of Business:**

2220 COUNTY ROAD 210 WEST  
UNIT 108-139  
JACKSONVILLE, FL 32259

**Current Mailing Address:**

2220 COUNTY ROAD 210 WEST  
UNIT 108-139  
JACKSONVILLE, FL 32259

**FEI Number:** 11-3654965

**Certificate of Status Desired:** No

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

SWANSON, JOHN P  
6595 COLLIER ROAD  
ST. AUGUSTINE, FL 32092 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 PD  
Name SWANSON, JOHN P  
Address 6595 COLLIER ROAD  
City-State-Zip: ST. AUGUSTINE FL 32092

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:** JOHN SWANSON

PD

03/27/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date