#### 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. 05/01/2017

SIGNATURE: STARLENE TITTLE

Electronic Signature of Signing Officer/Director Detail

# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000052581

Entity Name: STAR FIRE SPRINKLERS, INC.

#### **Current Principal Place of Business:**

**533 STEVENS STREET** JACKSONVILLE, FL 32254

## **Current Mailing Address:**

STAR FIRE SPRINKLERS, INC. P O BOX 61425 JACKSONVILLE, FL 32236

## FEI Number: 26-2650236

# Name and Address of Current Registered Agent:

TITTLE, STARLENE A 15642 CR 108 JACKSONVILLE, FL 32046 US Certificate of Status Desired: No

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

## Officer/Director Detail :

PD	Title	S
TITTLE, STARLENE A	Name	THOMAS, JOSEPH R
15642 CR 108	Address	5115 BLAND RD.
HILLIARD FL 32046	City-State-Zip:	JACKSONVILLE FL 32254
	PD TITTLE, STARLENE A 15642 CR 108	PD Title TITTLE, STARLENE A Name 15642 CR 108 Address

PRESIDENT

## FILED May 01, 2017 Secretary of State CC9397435520

Date

Date