

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000048245

**FILED**  
**Jan 30, 2017**  
**Secretary of State**  
**CC8276781386**

**Entity Name:** ABC FIRE EQUIPMENT CORPORATION

**Current Principal Place of Business:**

5370 JAEGER ROAD  
NAPLES, FL 34109

**Current Mailing Address:**

5370 JAEGER ROAD  
NAPLES, FL 34109 US

**FEI Number:** 59-3451741

**Certificate of Status Desired:** No

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

JACOBS, TODD  
5391 TAMARIND RIDGE DR  
NAPLES, FL 34119 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 V  
Name DENAE, DOLDE  
Address 2791 ARDISIA LANE  
City-State-Zip: NAPLES FL 34109

Title SD  
Name DOLDE, WILLIAM  
Address 2791 ARDISIA LANE  
City-State-Zip: NAPLES FL 34109

Title PD  
Name JACOBS, TODD  
Address 5391 TAMARIND RIDGE DR  
City-State-Zip: NAPLES FL 34119

Title TD  
Name JACOBS, DONALD  
Address 5957 HAMMOCK ISLES CIR  
City-State-Zip: NAPLES FL 34119

*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:** DENAE DOLDE

VP

01/30/2017

Electronic Signature of Signing Officer/Director Detail

Date