

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S39832

**Entity Name:** MILTON J. WOOD FIRE PROTECTION, INC.**Current Principal Place of Business:**3805 FAYE ROAD  
JACKSONVILLE, FL 32226**Current Mailing Address:**3805 FAYE ROAD  
JACKSONVILLE, FL 32226**FEI Number:** 59-3055303**Certificate of Status Desired:** No**Name and Address of Current 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | WOOD, MARK S.         |
| Address         | 3805 FAYE ROAD        |
| City-State-Zip: | JACKSONVILLE FL 32226 |

|                 |                       |
|-----------------|-----------------------|
| Title           | S, CFO                |
| Name            | NEMETH, ANNMARIE      |
| Address         | 3805 FAYE ROAD        |
| City-State-Zip: | JACKSONVILLE FL 32226 |

|                 |                       |
|-----------------|-----------------------|
| Title           | D, CEO                |
| Name            | OGNJENOVIC, ZARKO     |
| Address         | 3805 FAYE ROAD        |
| City-State-Zip: | JACKSONVILLE FL 32226 |

|                 |                       |
|-----------------|-----------------------|
| Title           | D, COO                |
| Name            | BOZEMAN, ALBERT       |
| Address         | 3805 FAYE ROAD        |
| City-State-Zip: | JACKSONVILLE FL 32226 |

|                 |                       |
|-----------------|-----------------------|
| Title           | D, TREASURER          |
| Name            | TANKERSLEY, DAVID W   |
| Address         | 3805 FAYE ROAD        |
| City-State-Zip: | JACKSONVILLE FL 32226 |

*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:** ANNMARIE NEMETH**CFO****03/07/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date