

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J99542

FILED  
Apr 23, 2006  
Secretary of State

Entity Name: INTERACTIVE TECHNOLOGIES, INC.

**Current Principal Place of Business:**

3509 MOUNT BERWICK DR.  
APOPKA, FL 327124742 US

**New Principal Place of Business:**

5040 MAGNOLIA CREEK DRIVE  
CUMMING, GA 30040 US

**Current Mailing Address:**

3509 MOUNT BERWICK DR.  
APOPKA, FL 327124742 US

**New Mailing Address:**

5040 MAGNOLIA CREEK DRIVE  
CUMMING, GA 30040 US

FEI Number: 65-0144438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSTON, ROBERT G  
1720 N.W. RIVER TRAIL  
STUART, FL 34994 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JOHNSTON, ROBERT G., JR.  
Address: 3509 MOUNT BERWICK DR.  
City-St-Zip: APOPKA, FL 327124742

Title: V ( ) Delete  
Name: JOHNSTON, ROBERT G.,  
Address: 1720 N.W. RIVER TRAIL  
City-St-Zip: STUART, FL

Title: VSTD ( ) Delete  
Name: JOHNSTON, DAWN T  
Address: 3509 MT. BERWICK DR.  
City-St-Zip: APOPKA, FL 327124742

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: JOHNSTON, JR., ROBERT G  
Address: 5040 MAGNOLIA CREEK DRIVE  
City-St-Zip: CUMMING, GA 30040

Title: V (X) Change ( ) Addition  
Name: JOHNSTON, ROBERT G  
Address: 1720 N.W. RIVER TRAIL  
City-St-Zip: STUART, FL 34994

Title: VSTD (X) Change ( ) Addition  
Name: JOHNSTON, DAWN T  
Address: 5040 MAGNOLIA CREEK DRIVE  
City-St-Zip: CUMMING, GA 30040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAWN T JOHNSTON

V

04/23/2006

Electronic Signature of Signing Officer or Director

Date