

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001668

Entity Name: SUNSTATES SECURITY, LLC

FILED
Apr 03, 2008
Secretary of State

Current Principal Place of Business:

C/O SAM POLITI
6450 PHILLIPS HIGHWAY, SUITE 8
JACKSONVILLE, FL 32216

New Principal Place of Business:

C/O SAM POLITI
3435 PHILLIPS HWY, STE 310
JACKSONVILLE, FL 32207

Current Mailing Address:

133 SOUTH CENTER COURT
SUITE 100
MORRISVILLE, NC 27560

New Mailing Address:

133 SOUTH CENTER COURT
SUITE 1100
MORRISVILLE, NC 27560

FEI Number: 56-2053968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, STE. 4
WESTON, FL 33331 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BURRELL, GLENN
Address: 133 SOUTHCENTER COURT SUITE 1100
City-St-Zip: MORRISVILLE, NC 27650

Title: MGR () Delete
Name: CROTHALL, GRAEME A
Address: 300 CONSHOHOCKEN STATE ROAD #650
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

Title: MGR (X) Delete
Name: VITALE, ROBERT
Address: 300 CONSHOHOCKEN STATE ROAD #650
City-St-Zip: WEST CONSHOHOCKEN, PA 19428

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: BURRELL, KATHY
Address: 133 SOUTHCENTER CT, SUITE 1100
City-St-Zip: MORRISVILLE, NC 27560

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GLENN BURRELL

PRES

04/03/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date