

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39974

FILED
Jan 31, 2009
Secretary of State

Entity Name: ALARM INDUSTRY FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

1802 N UNIVERSITY DR
STE 329
PLANTATION, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

1802 N UNIVERSITY DR
STE 329
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 59-3063977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEELY, ROBERT E
1802 N. UNIVERSITY DR.
STE. 329
PLANTATION, FL 33322 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: POLLACK, ROY
Address: 3880 N 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

Title: SECR () Delete
Name: GALLOWAY, MARY
Address: 3307 NW 55 STREET
City-St-Zip: FT LAUDERDALE, FL 33309

Title: TRES () Delete
Name: WORTHY, ROBERT
Address: 592 RIVERSIDE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: IRELAND, C. ROBERT
Address: 1991 SW 127 AVE
City-St-Zip: DAVIE, FL 33325

Title: SECR (X) Change () Addition
Name: POLLACK, ROY
Address: 3880 N 28 TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

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

Title: DIR () Change (X) Addition
Name: NEELY, ROBERT E EX DIR
Address: 1802 N UNIVERSITY DIRVE # 329
City-St-Zip: PLANTATION, FL 33322 US

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E NEELY

DIR

01/31/2009

Electronic Signature of Signing Officer or Director

Date