

**2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# L56313

**Entity Name:** ALARM TRUST OF FLORIDA, INC.

**Current Principal Place of Business:**

1249 STIRLING RD.  
SUITE 6  
DANIA BEACH, FL 33004

**Current Mailing Address:**

1249 STIRLING RD.  
SUITE 6  
DANIA BEACH, FL 33004 US

**FEI Number:** 65-0176192

**Certificate of Status Desired:** No

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

LEVITT, JOHN D  
2139 N.W. 75TH WAY  
PEMBROKE PINES, FL 33024 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:** JOHN D. LEVITT

07/29/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name LEVITT, J. DAVID  
Address 2139 NW 75 WAY  
City-State-Zip: PEMBROKE PINES FL 33024

Title D  
Name LEONE, JOHN G  
Address 8650 NW 10 PLACE  
City-State-Zip: PLANTATION FL 33322

Title DVP  
Name LEVITT, AARON E  
Address 1440 N. 64TH AVE  
City-State-Zip: HOLLYWOOD FL 33024

Title DVPST  
Name LEVITT, MARK  
Address 5761 SW 31ST AVE  
City-State-Zip: FOR LAUDERDALE FL 33312

Title OFFICER  
Name BOMAC ELECTRIC  
Address 2723 N.W. 19TH STREET  
City-State-Zip: POMPANO BEACH FL 33069

*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:** AARON LEVITT

DVP

07/29/2015

Electronic Signature of Signing Officer/Director Detail

Date