

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002272

Entity Name: SECURITY PROVIDERS OF FLORIDA, INC.

Current Principal Place of Business:

4793 N CONGRESS AVENUE
204
BOYNTON BEACH, FL 33426

Current Mailing Address:

P.O. BOX 211626
ROYAL PALM BEACH, FL 33421-1626 US

FEI Number: 26-1706308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, LYNN M
8891 OKEECHOBEE BLVD
APT #303
WEST PALM BEACH, FL 33411 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 PS
Name SMITH, LYNN M
Address 8891 OKEECHOBEE BLVD
APT # 303
City-State-Zip: WEST PALM BEACH FL 33411

Title VP
Name SCINSKI, THEODORE
Address 1584 SHAKERWOOD CIR
City-State-Zip: WELLINGTON FL 33414

Title JVP
Name SMITH, LYALL W
Address 932 CAMELLIA DR
City-State-Zip: ROYAL PALM BEACH FL 33411

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: LYNN M. SMITH

PRESIDENT

02/14/2014

Electronic Signature of Signing Officer/Director Detail

Date