

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000012589

**Entity Name:** ALEXANDER SECURITY AND PROTECTION LLC.

**Current Principal Place of Business:**

117 N. SCOTT AVE  
SANFORD, FL 32771

**Current Mailing Address:**

117 N. SCOTT AVE  
SANFORD, FL 32771 US

**FEI Number: 27-1901817**

**Certificate of Status Desired: No**

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

LI, JAMES M  
117 N. SCOTT AVE  
SANFORD, FL 32771 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:** JAMES M LI

04/20/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PRINCIPLE  
Name LI, JAMES M  
Address 117 N. SCOTT AVE  
City-State-Zip: SANFORD FL 32771

Title AUTHORIZED MEMBER  
Name LI, JENNIFER MS.  
Address 117 N. SCOTT AVE  
City-State-Zip: SANFORD FL 32771

Title DIRECTOR OF OPERATIONS  
Name LI, JAMES M  
Address 117 N. SCOTT AVE  
City-State-Zip: SANFORD FL 32771

Title DIRECTOR OF SALES AND MARKETING  
Name JOHNSON, WARREN SCOTT  
Address 117 N. SCOTT AVE  
City-State-Zip: SANFORD FL 32771

Title SERVICE DIRECTOR  
Name LANGENBACH, RICHARD MATTHEW  
Address 117 N. SCOTT AVE  
City-State-Zip: SANFORD FL 32771

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JENNIFER LI

**AUTHORIZED MEMBER**

04/20/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date