

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L16000114424

Entity Name: LAKE NONA SECURITY, LLC**Current Principal Place of Business:**6900 TAVISTOCK LAKES BOULEVARD, SUITE 200
ORLANDO, FL 32827**Current Mailing Address:**6900 TAVISTOCK LAKES BOULEVARD, SUITE 200
ORLANDO, FL 32827**FEI Number:** 35-2565123**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL REGISTERED AGENTS, INC.
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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:** PETER F. SOUZA, ASSISTANT SECRETARY

04/13/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|--|
| Title | P |
| Name | COLLIN, THOMAS CRAIG |
| Address | 6900 TAVISTOCK LAKES BOULEVARD, SUITE 200 |
| City-State-Zip: | ORLANDO FL 32827 |

| | |
|-----------------|--|
| Title | VP, T |
| Name | BERMAN, MARTIN |
| Address | 6900 TAVISTOCK LAKES BOULEVARD, SUITE 200 |
| City-State-Zip: | ORLANDO FL 32827 |

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: THOMAS CRAIG COLLIN

PRESIDENT

04/13/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date