

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000122053

**Entity Name:** PROCORP SECURITY SOLUTIONS, LLC

**Current Principal Place of Business:**

8535-62 BAYMEADOWS ROAD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

8535-62 BAYMEADOWS ROAD  
JACKSONVILLE, FL 32256 UN

**FEI Number:** 82-1784761

**Certificate of Status Desired:** No

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

EWAN, FREDERICK  
8535-62 BAYMEADOWS ROAD  
JACKSONVILLE, FL 32256 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	EWAN, FREDERICK	Name	OZIMEK, ROBERT E
Address	8535-62 BAYMEADOWS ROAD	Address	8535-62 BAYMEADOWS ROAD
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256

*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:** FREDERICK EWAN

**MANAGER**

**04/30/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date