

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000004938

**Entity Name:** AUTOMATED PROTECTION SYSTEMS, INC.

**Current Principal Place of Business:**

1100 BUSINESS PKWY S, STE. 2  
WESTMINSTER, MD 21157

**Current Mailing Address:**

1100 BUSINESS PKWY S, STE. 2  
WESTMINSTER, MD 21157 US

**FEI Number:** 52-1934192

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH STREET NORTH  
SUITE 300  
ST.PETERSBURG, FL 33702 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 P  
Name HARE, MARK R  
Address 3650 MILLERS STATION RD, P.O. BOX  
97  
City-State-Zip: MANCHESTER MD 21102

Title VP  
Name HARE, CINDY L  
Address 3650 MILLERS STATION RD, P.O. BOX  
97  
City-State-Zip: MANCHESTER MD 21102

*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:** CINDY L HARE

**VICE PRESIDENT**

**02/01/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date