2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 466650

FILED Jan 11, 2009 Secretary of State

Entity Name: SECURITY FENCE COMPANY OF FLORIDA, INC.

Current P	rincipal Plac	e of Business:	New Principal Plac	e of Business:
910 WAY AMPA, F	CROSS AVE L 33619			
Current M	lailing Addre	ss:	New Mailing Addre	ess:
910 WAY AMPA, F	(CROSS AVEI L 33619	NUE	6910 WAYCROSS A TAMPA, FL 33619	AVE
El Number	: 59-1575693	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
SUNSHIN	J. STEPHEN E STATE FED N, FL 33511	DERAL BUILDING US		
		submits this statement for the i	purpose of changing its register	red office or registered agent, or both,
	e named entity e of Florida.			
	e of Florida.			
n the Stat	e of Florida. [*] RE:	nic Signature of Registered Ag	ent	 Date
n the Stat	e of Florida. RE: Electro		ent	Date
n the State	e of Florida. RE: Electro	nic Signature of Registered Ag		Date GES TO OFFICERS AND DIRECTOR
n the State	e of Florida. RE: Electro mpaign Financir S AND DIREC	nic Signature of Registered Ag ng Trust Fund Contribution (). CTORS:) Delete SR,L. G.,		
n the Stati BIGNATU Election Cal DFFICER Title: lame: ddress:	e of Florida. RE: Electro mpaign Financir S AND DIRECTO PC (SANDERFUR: 6910 WESTIN TAMPA, FL	nic Signature of Registered Ag ig Trust Fund Contribution (). CTORS:) Delete SR,L. G., GHOUSE AVE.) Delete LUCILLE,	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
n the State CIGNATU CIECTION Cal CIECTION	e of Florida. RE: Electro mpaign Financir S AND DIRECT PC (SANDERFUR: 6910 WESTIN TAMPA, FL SDT (SANDERFUR: 6910 WESTIN TAMPA, FL VP (SANDERFUR:	nic Signature of Registered Ag ig Trust Fund Contribution (). CTORS:) Delete SR,L. G., GHOUSE AVE.) Delete LUCILLE, GHOUSE AVE.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEARON G. SANDERFUR. SR PC 01/11/2009