

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762396

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** SUN CITY CENTER SECURITY PATROL, INC.

**Current Principal Place of Business:**

1005 PEBBLE BCH BLVD N  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

**Current Mailing Address:**

1005 PEBBLE BCH BLVD N  
SUN CITY CENTER, FL 33573

**New Mailing Address:**

**FEI Number:** 59-2169618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROCK, MICHAEL  
1842 WOLF LAUREL DR  
SUN CITY CENTER, FL 33573 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** TD  
**Name:** BROCK, MICHAEL  
**Address:** 1842 WOLF LAUREL DR  
**City-St-Zip:** SUN CITY CENTER, FL 33573

**Title:** SD  
**Name:** COURTER, EILEEN  
**Address:** 2306 PLATINUM DR  
**City-St-Zip:** SUN CITY CENTER, FL 33573

**Title:** VD  
**Name:** NOLDEN, KURT  
**Address:** 2346 EMERALD LAKE DR  
**City-St-Zip:** SUN CITY CENTER, FL 33573

**Title:** PD  
**Name:** RYAN, KAREN  
**Address:** 419 BROCKFIELD DRIVE  
**City-St-Zip:** SUN CITY CENTER, FL 33573

**Title:** D  
**Name:** ALBANESE, MICHAEL J  
**Address:** 1808 GRANVILLE LN  
**City-St-Zip:** SUN CITY CENTER, FL 33573

**Title:** D  
**Name:** BALKANY, MARILYN  
**Address:** 1806 MILFORD CIRCLE  
**City-St-Zip:** SUN CITY CENTER, FL 33573

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** MICHAEL M. BROCK

TD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date