

FO8000000539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400200821254

04/08/11--01007--010 \*\*35.00

FILED  
2011 MAY 26 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TBrown 5-31-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** -MORRISON SECURITY CORPORATION  
Name of Corporation

**DOCUMENT NUMBER:** F08000000539

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GLENN J. WEBBER  
Name of Contact Person

GLENN J. WEBBER P.A.  
Firm/Company

101 East Ocean Boulevard  
Address

Stuart, FL 34994  
City/State and Zip Code

Glenn@webberfl.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Glenn J. Webber at ( 772 ) 287-5600  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2011

GLENN J WEBBER P.A.  
101 E OCEAN BLVD  
STUART, FL 34994

SUBJECT: MORRISON SECURITY CORPORATION  
Ref. Number: F08000000539

We have received your document for MORRISON SECURITY CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 011A00008683

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Morrison Security Corporation
2. The principal office address: 7600 Southland Blvd.  
Suite 100-317, Orlando, FL 32809
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/04/08 Document number: FO8000000539
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) \_\_\_\_\_

Marc Wigand  
6966 North Socrum Loop Road  
Lakeland, FL 33809

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Glenn J. Webber, Esq., P.A.  
101 East Ocean Boulevard  
P.O. Box NOT acceptable  
Stuart, FL 34994

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 MAY 26 AM 10:33

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Sean M. Morrison  
Signature of an officer or director

Sean-M. Morrison  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

5/13/11  
Date

If signing on behalf of an entity:

Glenn J. Webber  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314