

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004163

FILED  
Jun 11, 2012  
Secretary of State

**Entity Name:** MUTUAL CENTRAL ALARM SERVICES INC.

**Current Principal Place of Business:**

10 WEST 46TH STREET  
NEW YORK, NY 10036

**New Principal Place of Business:**

**Current Mailing Address:**

3880 NORTH 28TH TERRACE  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 13-3517681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MACDONALD, ANN  
3880 NORTH 28TH TERRACE  
HOLLYWOOD, FL 33020 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: DVPT  
Name: FORREST, SEAN  
Address: 3880 NORTH 28TH TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: P  
Name: COHEN, JOEL A  
Address: 10 WEST 46TH STREET  
City-St-Zip: NEW YORK, NY 10036

Title: VP  
Name: ADAMS, SCOTT  
Address: 10 WEST 46TH STREET  
City-St-Zip: NEW YORK, NY 10036

Title: VPS  
Name: MACDONALD, ANN  
Address: 3880 NORTH 28TH TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP  
Name: POLLACK, ROY  
Address: 3880 NORTH 38TH TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

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: ANN MACDONALD

VPS

06/11/2012

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

\_\_\_\_\_  
Date