

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90088 030 \*\*\*150.00

**DOCUMENT # F92000000768**

1. Entity Name

WE MONITOR AMERICA INCORPORATED

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

Suite, Apt. #, etc.  
6535 East Osborn

City & State  
Scottsdale, AZ

Zip  
85251

Country  
US

3. Mailing Address

c/o Nortek, Inc.

Suite, Apt. #, etc.  
50 Kennedy Plaza

City & State  
Providence, RI

Zip  
02903

Country  
US

DO NOT WRITE IN THIS SPACE

4. FEI Number  
86-0562177

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name  
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)  
1201 Hays Street

Suite 105

City  
Tallahassee

FL Zip Code  
32301

**DO NOT WRITE  
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back).

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Rummell, Grant D 3187 El Lando Court Oceanside, CA 92054
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D Breedy, Richard L 166 President Ave Providence, RI 02906
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Johnson, Scott 2855 S. Extension 251 Mesa, AZ 85201
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Donnelly, Kevin W 11 Foxhunt Rail Walpole, MA 02081
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D Cooney, Edward J 14 Hawthorne Ct. N.Kingstown, RI 02852
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Kevin W Donnelly* Kevin W Donnelly

Date

Daytime Phone #

CR2E034B (12/01)