

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002351

FILED
Aug 07, 2009
Secretary of State

Entity Name: SENTRYNET, INC.

Current Principal Place of Business:

121 HARVEY ST.
GREENVILLE, MS 38701

New Principal Place of Business:

121 SOUTH HARVEY STREET
GREENVILLE, MS 38701

Current Mailing Address:

517 N. BAYLEN
PENSACOLA, FL 32501

New Mailing Address:

517 NORTH BAYLEN STREET
PENSACOLA, FL 32501

FEI Number: 64-0749011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AVRITT, DAVID J
517 N. BAYLEN ST
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

AVRITT, DAVID J
517 NORTH BAYLEN STREET
PENSACOLA, FL 32501 US

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: _____

08/07/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: AVRITT, DAVID J
Address: 4812 HICKORY SHORES BLVD.
City-St-Zip: GULF BREEZE, FL 32561

Title: ST () Delete
Name: AVRITT, NANCY C
Address: 4812 HICKORY SHORES BLVD.
City-St-Zip: GULF BREEZE, FL 32561

Title: V () Delete
Name: JOSEPH, MICHAEL J
Address: 2715 BLACKSHEAR AVENUE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID J AVRITT

PRES

08/07/2009

Electronic Signature of Signing Officer or Director

Date