

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000179

1. Entity Name

SECURITY TECHNOLOGIES MONITORING, INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90115 006 ***158.75

Principal Place of Business

150 S PINE ISLAND RD
100
PLANTATION FL 33324

Mailing Address

150 S PINE ISLAND RD
100
PLANTATION FL 33323-2827

2. Principal Place of Business

1601 SAWGRASS CORPORATE PKWY

Suite, Apt. #, etc.

Suite 400

City & State

SUNRISE, FLORIDA

Zip

33323

Country

USA

3. Mailing Address

1601 SAWGRASS CORP. PKWY

Suite, Apt. #, etc.

Suite 400

City & State

SUNRISE, Florida

Zip

33323

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

52-0819819

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 VCS
NAME LANDIS, MARK ☐ Delete
STREET ADDRESS 150 S. PINE ISLAND ROAD SUITE 100
CITY-ST-ZIP PLANTATION FL 33324

TITLE COO
NAME WALIN, STEVEN E ☐ Delete
STREET ADDRESS 150 S. PINE ISLAND ROAD SUITE 100
CITY-ST-ZIP PLANTATION FL 33324

TITLE VP
NAME LEVINE, PERRY ☐ Delete
STREET ADDRESS 150 S. PINE ISLAND ROAD SUITE 100
CITY-ST-ZIP PLANTATION FL 33324

TITLE C
NAME KROLL, JULES ☐ Delete
STREET ADDRESS 150 S. PINE ISLAND ROAD SUITE 100
CITY-ST-ZIP PLANTATION FL 33324

TITLE CEO
NAME BUTLER, J. MURFREE ☐ Delete
STREET ADDRESS 150 S. PINE ISLAND ROAD SUITE 100
CITY-ST-ZIP PLANTATION FL 33324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICE CHAIRMAN ☒ Change ☐ Addition
NAME LANDIS, MARK
STREET ADDRESS 1601 SAWGRASS CORPORATE PKWY SUITE 400
CITY-ST-ZIP SUNRISE, FL 33323

TITLE CHIEF OPERATING OFFICER ☒ Change ☐ Addition
NAME WALIN, STEVEN
STREET ADDRESS 1601 SAWGRASS CORPORATE PKWY SUITE 400
CITY-ST-ZIP SUNRISE, FL 33323

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME LEVINE, PERRY
STREET ADDRESS 1601 SAWGRASS CORPORATE PKWY SUITE 400
CITY-ST-ZIP SUNRISE, FL 33323

TITLE CHAIRMAN ☒ Change ☐ Addition
NAME KROLL, JULES
STREET ADDRESS 1601 SAWGRASS CORPORATE PKWY SUITE 400
CITY-ST-ZIP SUNRISE, FL 33323

TITLE CHIEF EXECUTIVE OFFICER ☒ Change ☐ Addition
NAME BUTLER, J. MURFREE
STREET ADDRESS 1601 SAWGRASS CORPORATE PKWY SUITE 400
CITY-ST-ZIP SUNRISE, FL 33323

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ☒

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/00
Date

954-377-5905
Daytime Phone #

CR2E034 (9/99)