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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H03572

(5)

BRADENTON LOCK & SECURITY, INC.

FILED

Apr 29 1997 8:00am

Secretary of State

| rancipal Fiace of busiless Mailing Address | | | 088 | | | | | | | |
|--|---|------------------------------------|--|----------------------------|---------------------------------------|--|-------------------|------------------------------|-----------------------------|--|
| 4225 26TH STI BRADENTON F | | | 4225 26TH STREET WEST BRADENTON FL 34205-3515 | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 05/15/1984 | | ale of Last F 24/1996 | Report | |
| 2. Principal Place of Business 2a. Ma | | | Mailing Address | | | 4. FEI Number | | | polied For | |
| 21 | | 26 | 26 | | | F0.0440400 | | | ot Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt | Suite, Apt. #, etc. | | | ¢0.7E A.1/9 | | | | |
| 22 | | 27 | 27 | | | 5. Certificate of Status Desired | х× | | equired | |
| City & Stat | le | City & Sta | City & State | | | 6. Election Campaign Financing | | | May Be | |
| 23 | | 28 | 28 | | | Trust Fund Contribution | | | to Fees | |
| Zip Country | | Zip | | | B. This corporation has liability for | | | | | |
| 24 | 25 | 29 | 30 | D | | Florida Statutes | Yes | No | . 195.00E, | |
| | 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New I | | | | |
| HAR | RISON, THOMAS W. | | | 81 | Name | | ···· · | | · | |
| | B MANATEE AVENUE WES | Т | | 00 | Oler ed A | (6.0.6 | | | | |
| | DENTON FL 34205 | • | | 82 | Street / | Address (P.O. Box Number is Not Accept | abio) | | | |
| | | | | 83 | | | | · | | |
| | | | | | | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code | |
| 11. Pursuant | to the provisions of Sections 60 | 07 0502 and 607 1508 El | orida Statutos | the above | -namod a | corporation submits this statement for the | ГЦ | • | o sociatore d | |
| office or r | registered agent, or both, in the | State of Florida, Such of | jange was aut | liorized by | the corp | corporation submits this statement for the oration's board of directors. I hereby acc | purpose o | i changing i xointment as | is registerea registered | |
| | im ramiliar with, and accept the | obligations of, Section 6 | 07.0505, Floric | da Statutes | i . | | | | | |
| SIGNATURE | Signature, typod or printed name of regist | wed event and title if spelingtule | /NOTE 6 | logistated Ana | nt niceature | required which reinstating) | | | | |
| 12. | | RS AND DIRECTORS | (NOIL FI | 13. | nt signature i | ADDITIONS/CHANGES TO OFF | DATE | DIDECTOR | C IN 10 | |
| TITLE | PD | | DELETE | 1.1 TITLE | T | ADDITIONS/CHANGES TO OFF | ICENS AINL | Change | Addition | |
| NAME | HUBBARD, JOHN T. | -- | | 1.2 NAME | | | | [] Onlings | | |
| STREET ADDRESS | 4315 CALOOSA DRIVE | | | 1.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | PALMETTO FL | | | | | | | | | |
| TITLE | VD | .,,,, | DELETE | 1.4 CITY - S 2.1 TITLE | 1-211 | | | Change | Addition | |
| NAME | HUBBARD, RICHARD T. | X X-X | TOTAL TE | 2.1 NAME | ĺ | | | LI Change | ☐ Addition | |
| STREET ADDRESS | 3222 6TH AVENUE, W. | | | | | | | | | |
| CITY-ST-ZIP | PALMETTO FL | | | 2.3 STREET | | | | | | |
| TITLE | STD | П | DELETE | 2. 4 CITY - S 3.1 TITLE | 11 - ZIP | | | T Channe | Addition | |
| NAME | HUBBARD, CAROL G | L.J | VELLIE | | ļ | | | Change | ☐ Addition | |
| STREET ADDRESS | 4316 CALOOSA DRIVE | | | 3.2 NAME | ADDAL SE | | | | | |
| · · | PALMETTO FL | | | 3.3 STREET | ł | | | | | |
| CITY-ST-ZIP TITLE | I ALMEITO FL | П | DELETE | 3 4. CITY - S | 1 - ZIP | | | | <u></u> | |
| | | L | ULLUL | 4.1 1ITLE | | | | Change | Addition | |
| NAME OZOSET ADODESO | | | | 4. 2 NAME | | | | | į | |
| STREET ADORESS | | | | 4.3 STREET | | | | | | |
| CITY-ST-ZIP | | | DELETE | 4.4 CHY-S | - Z (P | | | | | |
| TITLE | | LJ | DEFELE | 5.1 TALE | | | | Change | Addition | |
| NAME | | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | | 5.3 \$TREE1 | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 5.4 CITY-S | I - ZIP | | | | | |
| TITLE | | | DELETE | 6.1 TO LE | T | | | Change | Addition | |
| NAME | | | | 6.2 NAME | - | | | | ĺ | |
| STREET ADDRESS | | | | 6.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 6 A CITY - C | | | | | | |

I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attrichment with an address.