


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 24, 2005 08:00 AM  
Secretary of State

DOCUMENT # H36108	
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1. Entity Name  
SECURITY BOND ASSOCIATES, INC. OF TALLAHASSEE

Principal Place of Business  
1327 N ADAMS ST  
TALLAHASSEE, FL 32303

Mailing Address  
1327 N ADAMS ST  
TALLAHASSEE, FL 32303



01132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2479455

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

HARRISON, JAMES T JR.  
1327 N ADAMS ST.  
TALLAHASSEE, FL 32303

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HARRISON, JAMES T JR.
STREET ADDRESS	1327 N. ADAMS ST.
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	D
NAME	HARRIS, BRADLEY
STREET ADDRESS	1327 N. ADAMS ST.
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	D
NAME	LANDRY, NANCY L
STREET ADDRESS	1327 N. ADAMS ST.
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000129880  
01/24/05-80114-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Nancy Landry*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/05

(850)  
545-5712

Date

Daytime Phone #