

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J74294

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: ALARM SECURITY SYSTEMS, INC.

## Current Principal Place of Business:

% ROGER HORN  
5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

## New Principal Place of Business:

5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

## Current Mailing Address:

% ROGER HORN  
5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

## New Mailing Address:

5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

FEI Number: 59-2811816

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HORN, ROGER  
5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 US

## Name and Address of New Registered Agent:

RYAN, MICHAEL P  
5690 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429 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: MICHAEL RYAN

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HORN, ROGER L.,  
Address: PO BOX 1628  
City-St-Zip: CRYSTAL RIVER, FL

Title: ST (X) Delete  
Name: HORN, JENNIFER,  
Address: PO BOX 1628  
City-St-Zip: CRYSTAL RIVER, FL

Title: V (X) Delete  
Name: RYAN, MICHAEL  
Address: 5425 W PAUL BRYANT DR  
City-St-Zip: CRYSTAL RIVER, FL 34429

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RYAN, MICHAEL,  
Address: 5425 W. PAUL BRYANT DR.  
City-St-Zip: CRYSTAL RIVER, FL 34429

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 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: MICHAEL RYAN

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date