

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K61652

FILED
Jan 28, 2009
Secretary of State

Entity Name: DIGITAL SECURITY SYSTEMS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

1610 NORTH MAIN ST.
JACKSONVILLE, FL 32206

New Principal Place of Business:

1337 LAURA ST.
JACKSONVILLE, FL 32206

Current Mailing Address:

POB 3357
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-2936522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIDE, MOSES, JR.
817 N. MAIN STREET
JACKSONVILLE, FL US

Name and Address of New Registered Agent:

MEIDE, MOSES, JR.
817 N. MAIN STREET
JACKSONVILLE, FL 32202 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: _____

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: GALBREATH, DAVID C.,
Address: 1610 N MAIN STREET
City-St-Zip: JACKSONVILLE, FL

Title: P () Delete
Name: GALBREATH, GERRY
Address: 1610 NORTH MAIN STREET
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: GALBREATH, DAVID C.,
Address: 1610 N MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: P (X) Change () Addition
Name: GALBREATH, GERRY
Address: 1610 NORTH MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32206

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 C GALBREATH

VP/D

01/28/2009

Electronic Signature of Signing Officer or Director

Date