

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051975

FILED
Feb 17, 2011
Secretary of State

Entity Name: COMPLETE PROTECTION, L.L.C.

Current Principal Place of Business:

7933 W. HOMOSASSA TRAIL
HOMOSASSA, FL 34448 US

New Principal Place of Business:

8415 E. GOSPEL ISLAND RD.
INVERNESS, FL 34450 US

Current Mailing Address:

P. O. 757
HOMOSASSA SPRINGS, FL 34447 US

New Mailing Address:

FEI Number: 59-3239071 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCALZI, TIMOTHY MGRM
7933 W. HOMOSASSA TRAIL
HOMOSASSA, FL 34448 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SCALZI, TIMOTHY OWNER
Address: 8415 E. GOSPEL ISLAND RD.
City-St-Zip: INVERNESS, FL 34450 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIMOTHY SCALZI MGRM 02/17/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date