

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056970

FILED  
Apr 14, 2005  
Secretary of State

**Entity Name:** TRIDENT SECURITY ASSOCIATES, LLC

**Current Principal Place of Business:**

7617 DESERT WAY INN WAY  
BRADENTON, FL 34202

**New Principal Place of Business:**

**Current Mailing Address:**

7320 EAST FLETCHER STREET  
HIDDEN RIVER CORPORATE PARK  
TAMPA, FL 33637

**New Mailing Address:**

**FEI Number:** 20-1454255      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JOHNSON, DAVID P  
2201 RINGLING BLVD., SUITE 104  
SARASOTA, FL 34237 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: JOSE BERRIOS, HECTOR  
Address: 7617 DESERT INN WAY  
City-St-Zip: BRADENTON, FL 34202

Title: MGRM ( ) Delete  
Name: GUSTAFSON, ERIC LEE  
Address: 2810 FAILLING LEAVES DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: MGRM ( ) Delete  
Name: WEEDON, WARREN  
Address: 2714 HERNDON STREET  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BERRIOS, HECTOR JOSE  
Address: 7617 DESERT INN WAY  
City-St-Zip: BRADENTON, FL 34202

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 Section 119.07(3)(i), Florida Statutes. I further 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: HECTOR JOSE BERRIOS

MGRM

04/14/2005

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