

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093133

Entity Name: IHK SECURITY, LLC

FILED
Jul 02, 2007
Secretary of State

Current Principal Place of Business:

5000 PARK STREET NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8448
MADEIRA BEACH, FL 33738

New Mailing Address:

FEI Number: 04-3831222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MANEY & GORDON, P.A.
101 E. KENNEDY BLVD
3170
TAMPA, FL 33602 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WALPOLE, GORDON JEREMY
Address: 5000 PARK STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

Title: MGR () Delete
Name: STEINHOFF, RON
Address: 5000 PARK STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

Title: MGRM () Delete
Name: LEE, MILLIE
Address: 5000 PARK STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 exemption stated in Chapter 119, 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: RON STEINHOFF

MGR

07/02/2007

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