FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 3:55

DOCUMENT # **L06334** **(1)**

1. Corporation Name
SCOTT ALARM OF TAMPA, INC.

Principal Place of Business	Mailing Address
4695 ULMERTON RD STE 530 CLEARWATER FL 34622 US	4695 ULMERTON RD STE 530 CLEARWATER FL 34622 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/03/1989	3a. Date of Last Report: 04/27/1994
4. FEI Number: 65-0134255	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 13555 Automobile Blvd	26 P.O. Box 17682
Suite, Apt. #, etc. 22 Suite 530	Suite, Apt. #, etc. 27
City & State 23 Clearwater, FL.	City & State 28 Clearwater, FL.
Zip / Country 24 34622 / 25 U.S.A.	Zip / Country 29 34622-0682 / 30 U.S.A.

9. Name and Address of Current Registered Agent

TUTHILL, JOHN E ESQ
3300-49TH STREET NORTH
ST PETERSBURG FL 33710

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John E. Tuthill — DATE

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BUCK, STEPHAN F.	12 NAME	
STREET ADDRESS	3047 OVERLOOK PLACE	13 STREET ADDRESS	
CITY ST ZIP	CLEARWATER FL	14 CITY ST ZIP	
TITLE	VP	21 TITLE	VP ☒ Change ☐ Addition
NAME	SCOTT, BRUCE A.	22 NAME	Scott, Bruce A.
STREET ADDRESS	313 PORPOISE POINT DR	23 STREET ADDRESS	3362 S.R. #13
CITY ST ZIP	ST AUGUSTINE FL	24 CITY ST ZIP	Switzerland, FL. 32259
TITLE	ST	31 TITLE	☐ Change ☐ Addition
NAME	BUCK, RONI L.	32 NAME	
STREET ADDRESS	3047 OVERLOOK PLACE	33 STREET ADDRESS	
CITY ST ZIP	CLEARWATER FL	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stephan F. Buck, STEPHAN F. BUCK 4/6/95 813-573-3733

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0384241 CP