

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000017558

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** BEST SOURCE SECURITY, LLC

**Current Principal Place of Business:**

4406 SOUTH FLORIDA AVENUE, SUITE 20A  
LAKELAND, FL 33813 US

**New Principal Place of Business:**

748 PARKVIEW PLACE  
LAKELAND, FL 33805 US

**Current Mailing Address:**

P.O. BOX 91964  
LAKELAND, FL 33804 US

**New Mailing Address:**

P.O. BOX 91964  
LAKELAND, FL 33804 US

**FEI Number:** 94-3477231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUILES, ELBA O  
4406 SOUTH FLORIDA AVENUE, SUITE 20A  
LAKELAND, FL 33813 US

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

QUILES, ELBA O  
748 PARKVIEW PLACE  
LAKELAND, FL 33805 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:

03/16/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: QUILES, ELBA O  
Address: 748 PARKVIEW PLACE  
City-St-Zip: LAKELAND, FL 33805 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: ELBA O. QUILES

MGR

03/16/2011

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