

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000116501

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** SAFETY SENTINEL TECHNOLOGIES, LLC

**Current Principal Place of Business:**

1201-B ARRAPAHO AVENUE  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

1201-B ARAPAHO AVENUE  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

1201-B ARRAPAHO AVENUE  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

1201-B ARAPAHO AVENUE  
ST. AUGUSTINE, FL 32084

**FEI Number:** 27-1463383

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAW OFFICES OF JOHN GALLETTA, JR., P.L.  
1095 ANASTASIA BLVD.  
ST. AUGUSTINE, FL 32080 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: MGR  
Name: KILPATRICK, GARRY M  
Address: 1201-B ARRAPAHO AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGR  
Name: PARSONS, MARK E  
Address: 1201-B ARRAPAHO AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGR  
Name: SAM, DEWAR  
Address: 1201-B ARAPAHO AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

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:** GARRY M. KILPATRICK

MGR

04/30/2010

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