

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000033773

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** STATEWIDE PROTECTION ASSOCIATES, LLC

**Current Principal Place of Business:**

1157 44TH ST  
SARASOTA, FL 34234

**New Principal Place of Business:**

2410 21ST STREET COURT EAST  
PALMETTO, FL 34221

**Current Mailing Address:**

1157 44TH ST  
SARASOTA, FL 34234

**New Mailing Address:**

PO BOX 1801  
TALLEVAST, FL 34270

**FEI Number:** 27-2217431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAVOIE, TRAVIS J  
1157 44TH ST  
SARASOTA, FL 34234 US

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

SAVOIE, TRAVIS J  
2410 21ST STREET COURT EAST  
PALMETTO, FL 34221 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: TRAVIS SAVOIE

04/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SAVOIE, TRAVIS J  
Address: BOX 1801  
City-St-Zip: TALLEVAST, FL 34270

Title: MGRM  
Name: BIDDLE, LANCE D  
Address: PO BOX 1801  
City-St-Zip: TALLEVAST, FL 34270

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: TRAVIS SAVOIE

MGRM

04/21/2011

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