

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000125065

**FILED**  
**Jun 27, 2012**  
**Secretary of State**

**Entity Name:** SECURITY & TELCO INTEGRATED SOLUTIONS LLC

**Current Principal Place of Business:**

1800 SOUTHWEST 2ND AVENUE  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

1800 SOUTHWEST 2ND AVENUE  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 45-3742343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NONEMAKER, CHRISTOPHER M  
1800 SOUTHWEST 2ND AVENUE  
POMPANO BEACH, FL 33060 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:** NONEMAKER, CHRISTOPHER M  
**Address:** 1800 SOUTHWEST 2ND AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33060

**Title:** MGR  
**Name:** NONEMAKER, LINDA A  
**Address:** 1800 SOUTHWEST 2ND AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33060

**Title:** MGR  
**Name:** ARTHUR, TETI J  
**Address:** 1800 SW 2ND AVE  
**City-St-Zip:** POMPANO BEACH, FL 33060

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:** CHRISTOPHER M NONEMAKER

PRES

06/27/2012

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