

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000145583

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** SHAMROCK SECURITY SYSTEMS, LLC

**Current Principal Place of Business:**

834 N. MAGNOLIA AVE.  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

834 N. MAGNOLIA AVE.  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-2872597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YANDLE, LANAS C  
834 N. MAGNOLIA AVE.  
OCALA, FL 34475 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: YANDLE, LANAS C  
Address: 4400 S.E. 44TH ROAD  
City-St-Zip: Ocala, FL 34480

Title: MGR  
Name: YANDLE, MARY  
Address: 4400 S.E. 44TH ROAD  
City-St-Zip: Ocala, FL 34480

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: LANAS C YANDLE

MGR

04/18/2012

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