## FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT

Sandra B. Morti

Secretary of \$tal DIVISION OF CORPOR

SNC

POCUMENT # L80466

(0)

SECURED PROPERTY SERVICES, INC.

Principal Place of Business	Mailing Address 7441 MERRILL ROAD JACKSONVILLE FL 32277-3782 US		
7441 MERRILL ROAD JACKSONVILLE FL 32277 US ::			
2. Principal Place of Business	2a. Mailing Address		
21	26		
Suite, Apt. #, etc.	Suite, Apt. #, etc		
22	27		
City & State	City & State		
23	28		

FILED
May 13 1997 8:00am
Secretary of State



3a. Date of Last Report

Applied For

04/30/1996

3. Date Incorporated or Qualified

06/13/1990

Suite, Apt	# elc	Suite, Apt. #, etc		59-3015220	Not Applicable
22		27	<u></u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required
<b>City &amp; Sta</b>	te	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Courry	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for intangib	
	9. Name and Address of Curre	nt Registered Agent		Florida Statutes Yes  10. Name and Address of New Registere	□ No
HODGIES, MICHAEL G. 7441 MERRILL ROAD JACKSONVILLE FL 32277			1 Name	10. Hame and Address of Hew Hegistele	1 Ağaur
			2 Street A	Address (P.O. Box Number is Not Acceptable)	
met.	UNGUNVILLE FL 32277		3		
			[]		
•			4 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607.1508, Florida Stat	utes, the at	F	
office or agent. La	registered agent, or both, in the State am familiar with, and accept the oblice	of Florida. Such change was lations of, Section 607 0505. I	s authorize, ve-named Florida Stafoy the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered
CONTATURE	arrange that, and accopy the ornig	(anong 51, 0000011 50) .0005. I	es.	, week the di	
SIGNATURE	Signature, typed or printed name of registereo ag-	ent and tipe if applicable (No	Ö1E: Registorer	required when reinstaling) DATE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 40
TITLE	PD	DELETE	1.1 10	ABBITIONS/OFFICENS AN	
NAME	HODGES, MICHAEL G.		1.2 N <sub>L</sub>		☐ Change ☐ Addition
STREET ADDRESS	7441 MERRILL ROAD		13ST ADDRESS		(-
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CI ST-7IP		
TITLE	- UNCOCOTTICUE I E	DELETE	2.1 II		
NAME	ł		2.2 N/		Change Addition ]
STREET ADDRESS					
CITY-ST-ZIP	16		2.3 St. T ADDRESS		
TITLE		DELETE	2 4 C 3.1 T)		
NAME			32 N/		Change Addition
STREET ADDRESS					
CITY-ST-ZIP			3.3 S1 1 ADDRESS 3.4. C S1-7IP		
TITLE		DELETE	4.1 11 S7 - 7IP		
NAME	1		4.2 N		Change Addition
STREET ADDRESS	Į.		120		
CITY-ST-ZIP			4.5 S IT ADDRESS		
TITLE		DELETE	51 112 SI-ZIP		
NAME			52 N		☐ Change ☐ Addition
STREET ADDRESS	l .		530		1
CITY+ST-ZIP	1		5.5 S I ADDRESS		
TITLE		DELETE	61 T		
NAME	}		6.2 N		☐ Change ☐ Addition
STREET ADDRESS	ļ		6.3 S		]
CITY-ST-ZIP	by cartify that the information symplic	N with this filing does not aw	64 C ST-ZIP		
informati	ion indicated on this annual report or	supplemental annual report is	cemption sta	ted in Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the
i am an c	officer or director of the comoration o	r the receive or trusted empo	owered to curate and t	hat my signature shall have the same legal effect a	s if made under oath; that