2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2006
Secretary of State

DOCUMENT# M03000003354

Entity Name: APEX ALARM, LLC

Current Principal Place of Business:

580 SOUTH STATE ST.
OREM, UT 84058

New Principal Place of Business:

5132 NORTH 300 WEST
PROVO, UT 84604

Current Mailing Address:

580 SOUTH STATE ST.
OREM, UT 84058

New Mailing Address:

5132 NORTH 300 WEST
PROVO, UT 84604

FEI Number: 87-0623648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM ( ) Delete
Name: PEDERSEN, TODD
Address: 580 SOUTH STATE ST.
City-St-Zip: OREM, UT 84058

Title: MGRM ( ) Delete
Name: NELLESEN, KEITH
Address: 580 SOUTH STATE ST.
City-St-Zip: OREM, UT 84058

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PEDERSEN, TODD
Address: 5132 NORTH 300 WEST
City-St-Zip: PROVO, UT 84604

Title: MGRM (X) Change ( ) Addition
Name: NELLESEN, KEITH
Address: 5132 NORTH 300 WEST
City-St-Zip: PROVO, UT 84604

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: TODD PEDERSEN MGRM 07/06/2006

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