

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004210

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: SAFEGUARD SERVICES OF DELAWARE LLC

**Current Principal Place of Business:**

5400 LEGACY DRIVE  
PLANO, TX 75204

**New Principal Place of Business:**

**Current Mailing Address:**

5400 LEGACY DRIVE  
PLANO, TX 75204

**New Mailing Address:**

5400 LEGACY DRIVE  
H1 4A 66  
PLANO, TX 75204

FEI Number: 20-4734389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**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: MGR ( ) Delete  
Name: DEFENBAUGH, DANNY A  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: MGR ( ) Delete  
Name: BRYAN, DAVE M  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: MGR ( ) Delete  
Name: ISRAELSON, DAVID H  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: MGR ( ) Delete  
Name: DEGLANDON, DARRELL A  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: MGR ( ) Delete  
Name: DISCH, ELIZABETH  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: APPLE, HOWARD B  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: DISCH, ELIZABETH  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

Title: AT (X) Change ( ) Addition  
Name: WEISZHAAR, BARBARA B  
Address: 5400 LEGACY DRIVE  
City-St-Zip: PLANO, TX 75204

I hereby certify that the information supplied with this filing does not qualify 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: BARB ARA BARTON WEISZHAAR

AT

01/07/2009

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