

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000001204

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** ALLIED SECURITY HOLDINGS LLC

**Current Principal Place of Business:**

161 WASHINGTON STREET  
SUITE 600  
CONSHOHOCKEN, PA 19428

**New Principal Place of Business:**

**Current Mailing Address:**

161 WASHINGTON STREET  
SUITE 600  
CONSHOHOCKEN, PA 19428

**New Mailing Address:**

**FEI Number:** 20-1379003

**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  
Name: WHITMORE, JR., WILLIAM C  
Address: 161 WASHINGTON STREET, SUITE 600  
City-St-Zip: CONSHOHOCKEN, PA 19428

Title: MGR  
Name: TORZOLINI, WILLIAM A  
Address: 161 WASHINGTON STREET, SUITE 600  
City-St-Zip: CONSHOHOCKEN, PA 19428

Title: MGR  
Name: BUCKMAN, DAVID I  
Address: 161 WASHINGTON STREET, SUITE 600  
City-St-Zip: CONSHOHOCKEN, PA 19428

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: WILLIAM A. TORZOLINI

MGR

04/23/2012

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