2nd NOTICE: **Limited Liability Company Will Be Dissolved On Or After October 8, 1997. If Dissolved, Minimum Amount Due To Reinstate: $703.75**

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 SEP -8 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE $ 588.75 | Annual Report $100.00 + $103.75 Corporation Supplemental Fee + $385.00 Late Fee | Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # M96000000448

SECURICOR NEW CENTURY, L.L.C.
8907 RIVER ROAD
RICHMOND VA 23229

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

1a. Principal Place of Business Address
8907 RIVER ROAD
RICHMOND VA 23229

2. Principal Place of Business	2a. Mailing Address
9609 GAYTON ROAD	9609 GAYTON ROAD
Suite, Apt. #, etc.: SUITE 100	Suite, Apt. #, etc.: SUITE 100
City & State: RICHMOND, VA	City & State: RICHMOND, VA
Zip: 23233 Country: U.S.	Zip: 23233 Country: U.S.

3. Date Organized or Qualified: 11/13/1996
3a. State of Formation: VA
4. FEI Number: 54-1859903 ☐ Applied For ☐ Not Applicable
5. Date of Last Report
6. Certificate of Status Desired $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
MORGENTHAU, JOHN 10545 NORTH MERIDIAN ROAD TALLAHASSEE FL 32312	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City: FL Zip Code

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-09/10/97--01070--007
****588.75 ****588.75

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	MCCLURE, DIANE K	8907 RIVER ROAD	RICHMOND VA
MGRM	BROWNE, GAIL Y	8907 RIVER ROAD	RICHMOND VA
MGRM	MORGENTHAU, JOHN	10545 NORTH MERIDIAN ROAD	TALLAHASSEE FL
MGRM	BRENNAN, JAMES	207 KING STREET	COLUMBIA SC

AR 9-9

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Diane K. McClure
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #