


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 A
Secretary of State


DOCUMENT # N00000003789
 1. Entity Name
ALARM COMMUNITY DEVELOPMENT CENTER, INC.



Principal Place of Business
**2720 BLAIRSTONE RD.
 BUILDING F
 TALLAHASSEE, FL 32301**

Mailing Address
**P.O. BOX 5318
 TALLAHASSEE, FL 32314-5318**

DO NOT WRITE IN THIS SPACE



03042008 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-3636164	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**STEWART, ALVIN JR
 2720 BLAIRSTONE ROAD
 SUITE C
 TALLAHASSEE, FL 32301**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  Alvin D. Stewart, Jr. 3/14/08
(NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is **\$61.25** Due by **May 1, 2008**

Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000902035
 04/29/08-80090-018 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD STEWART, ALVIN JR 2720 BLAIRSTONE ROAD, STE.C TALLAHASSEE, FL 32301
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD STEWART, ALVIN D JR 2720 BLARISTONE ROAD, STE.C TALLAHASSEE, FL 32301
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD STEWART, LISA 2720 BLAIRSTONE ROAD STE. C TALLAHASSEE, FL 32301
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD SAMSON, LAWRENCE 2306 BRYNMAHR DRIVE TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE:  Alvin D. Stewart, Jr. 3/14/08
SIGNATURE AND TITLE OF REGISTERED AGENT OR SIGNING OFFICER OR DIRECTOR Date Daytime Phone #