

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003664

FILED  
Jan 18, 2006  
Secretary of State

Entity Name: FIRST LAST SECURITY, INC.

**Current Principal Place of Business:**

517 SW 9TH ST  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

**Current Mailing Address:**

517 SW 9TH ST  
CAPE CORAL, FL 33991

**New Mailing Address:**

FEI Number: 20-1212912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOLANOS TRUXTON, P.A.  
12800 UNIVERSITY DR  
SUITE 350  
FT MYERS, FL 33907 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RUSSELL, BRUCE C  
Address: 517 SW 9TH ST  
City-St-Zip: CAPE CORAL, FL 33991

Title: D ( ) Delete  
Name: RUSSELL, MICHELE L  
Address: 517 SW 9TH ST  
City-St-Zip: CAPE CORAL, FL 33991

Title: D ( ) Delete  
Name: SHAFER, TERESA L  
Address: 1451 FRIENDSHIP WALKWAY  
City-St-Zip: FT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE C. RUSSELL

P

01/18/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date