

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011622

FILED
Aug 27, 2009
Secretary of State

Entity Name: ALARM INTERNATIONAL, INC.

Current Principal Place of Business:

6157 HEARTLAND CIRCLE
TALLAHASSEE, FL 32312

New Principal Place of Business:

367 MARPAN LANE B2
TALLAHASSEE, FL 32305

Current Mailing Address:

P.O. BOX 5318
TALLAHASSEE, FL 323145318

New Mailing Address:

FEI Number: 26-1510774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STEWART, ALVIN D JR.
6157 HEARTLAND CIRCLE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

STEWART, ALVIN D JR.
367 MARPAN LANE B2
TALLAHASSEE, FL 32305 US

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: _____

08/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEWART, ALVIN D JR
Address: 6157 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: V () Delete
Name: WILSON, CANDICE
Address: 1815 MLK BLVD
City-St-Zip: MIDWAY, FL 32343

Title: T () Delete
Name: SAMSON, LIONNE
Address: 2306 BRYNMAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: OTWAY, HEIDI
Address: 6011 LOVE RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: STEWART, LISA
Address: 6157 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEWART, ALVIN D JR
Address: 367 MARPAN LANE B2
City-St-Zip: TALLAHASSEE, FL 32305

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

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

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

Title: D (X) Change () Addition
Name: STEWART, LISA
Address: 367 MARPAN LANE B2
City-St-Zip: TALLAHASSEE, FL 32305

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 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: ALVIN D STEWART JR

PD

08/27/2009

Electronic Signature of Signing Officer or Director

Date