2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026770

Entity Name: PALM BEACH ALARMS, INC.

JOHNSTON, HEATHER

127 SEA ISLAND TERRACE

BOCA RATON, FL 33431

Name:

Address:

City-St-Zip:

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	SLAND TERR TON, FL 334					
Current N	lailing Addre	ess:	New Mailin	New Mailing Address:		
	SLAND TERR TON, FL 334					
FEI Number	: 65-1082735	FEI Number Applied For()	FEI Number Not Applic	cable () Certificate of Status Desired ()		
Name and	l Address of	Current Registered Agent:	Name and A	Name and Address of New Registered Agent:		
127 SEA IS BOCA RA	INE, RONALI SLAND TERR TON, FL 334 named entity e of Florida.	ACE 31 US	e purpose of changing its	s registered office or registered agent, or both,		
SIGNATUI	RE:					
		nic Signature of Registered A	Agent	Date		
Election Ca	mpaign Financii	ng Trust Fund Contribution ().				
OFFICER	S AND DIREC	CTORS:	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LAFONTAINE,	ND TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V (ZIGMOND, JO 2001 NORTHI SANFORD, FI	AKE DR	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	LAFONTAINE,	ND TERRACE	Name: Address:	T,S (X) Change () Addition LAFONTAINE, MARK 127 SEA ISLAND TERRACE BOCA RATON, FL 33431		
Title:	s (Y) Delete	Title:	() Change () Addition		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RONALD A. LAFONTAINE P 04/22/2009