

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90145 019 ***150.00

DOCUMENT # P03000016870

1. Entity Name
SITESECURE, INC.



Principal Place of Business
627 PROGRESS WAY
SANFORD, FL 32771

Mailing Address
POST OFFICE BOX 471028
LAKE MONROE, FL 32747-1028



04072006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
54-2099204

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVOLI, RONALD F
750 COUNTY ROAD 15
LAKE MONROE, FL 32747-1028

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME DAVOLI, RONALD F
STREET ADDRESS 750 COUNTY ROAD 15
CITY-ST-ZIP LAKE MONROE, FL 327471028 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME SMITH, GEORGE E
STREET ADDRESS 750 COUNTY ROAD 15
CITY-ST-ZIP LAKE MONROE, FL 327471028 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME R. ANDREW BOWMAN
STREET ADDRESS 750 COUNTY ROAD 15
CITY-ST-ZIP LAKE MONROE, FL 327471028 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME TRYON, GARY V
STREET ADDRESS 750 COUNTY ROAD 15
CITY-ST-ZIP LAKE MONROE, FL 327471028 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ROBINSON, WILLIAM C
STREET ADDRESS 307 FOX VALLEY DR.
CITY-ST-ZIP LONGWOOD, FL 32779 ☐ Delete

TITLE S
NAME ROBINSON, WILLIAM C JR
STREET ADDRESS 307 FOX VALLEY DR.
CITY-ST-ZIP LONGWOOD, FL 32779 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE V
NAME RANDY PINKHAM
STREET ADDRESS 308 SHADOW OAK DR.
CITY-ST-ZIP CASSLEBERRY, FL 32707 ☐ Change ☒ Addition

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William C. Robinson Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/7/06 407 321-8410