2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 06, 2007 08:00 Al Secretary of State DOCUMENT # P03000041989 1. Entity Name COMPLETE ACCESS CONTROL OF CENTRAL FLORIDA, Principal Place of Business Mailing Address 3004 SUMMER SWAN DR 3004 SUMMER SWAN DR ORLANDO, FL 32825 ORLANDO, FL 32825 CR2E034 (11/05) 01152007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 54-2106354 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAURO, KAREN P DO NOT WRITE 3004 SUMMER SWAN DR ORLANDO, FL 32825 IN THIS SPACE 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, byped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MAURO, KAREN P NAME STREET ADDRESS 3004 SUMMER SWAN DR CITY-ST-ZIP ORLANDO, FL 32825 State that I have been been been been DVP TITLE NAME MAURO, VINCENT F U00000693634 04/16/07-80049-004 150.00 STREET ADDRESS 3004 SUMMER SWAN DR. CITY-ST-ZIP ORLANDO, FL 32825 TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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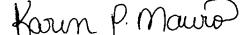
CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



^{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.