

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000068920

Entity Name: LIFE TRUST ALARMS, INC.

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4130 PALMETTO AVENUE  
HIGHLAND CITY, FL 33846

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 881  
HIGHLAND CITY, FL 33846

**New Mailing Address:**

FEI Number: 14-1886779

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLIVER, GERALD J  
4130 PALMETTO AVENUE  
HIGHLAND CITY, FL 33846 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CLIVER, GERALD J  
Address: 4130 PALMETTO AVENUE  
City-St-Zip: HIGHLAND CITY, FL 33846

Title: D  
Name: CLIVER, DEBORAH R  
Address: 4130 PALMETTO AVENUE  
City-St-Zip: HIGHLAND CITY, FL 33846

I hereby 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 all other like empowered.

SIGNATURE: GERALD J CLIVER

PRES

03/31/2010

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

\_\_\_\_\_  
Date