

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125806

FILED
Apr 19, 2006
Secretary of State

Entity Name: ADVANCED ALARM SOLUTIONS, INC.

Current Principal Place of Business:

568 SW 72ND TERRACE
OKEECHOBEE, FL 34974

New Principal Place of Business:

2800 SW 3RD TERRACE STE B
OKEECHOBEE, FL 34974

Current Mailing Address:

568 SW 72ND TERRACE
OKEECHOBEE, FL 34974

New Mailing Address:

P.O. BOX 787
OKEECHOBEE, FL 34973

FEI Number: 30-0117841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, JOHN R
805 SW PARK STREET
OKEECHOBEE, FL 34972 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: PSTD () Delete
Name: WALDRON, SHAWN T
Address: 568 SW 72ND TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SCRE () Change (X) Addition
Name: WALDRON, RHONDA L
Address: 568 SW 72ND TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: SHAWN T. WALDRON

PSTD

04/19/2006

Electronic Signature of Signing Officer or Director

Date