

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046125

Entity Name: AALARM-ONE, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

145 MOORE AVE.
MERRITT ISLAND, FL 32952

New Principal Place of Business:

585 BANANA BLVD.
MERRITT ISLAND, FL 32952

Current Mailing Address:

145 MOORE AVE.
MERRITT ISLAND, FL 32952

New Mailing Address:

585 BANANA BLVD.
MERRITT ISLAND, FL 32952

FEI Number: 20-0958380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRNSCHILD, THOMAS B
145 MOORE AVE.
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

FIRNSCHILD, THOMAS B
585 BANANA BLVD.
MERRITT ISLAND, FL 32952 US

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: THOMAS B. FIRNSCHILD

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FIRNSCHILD, THOMAS B
Address: 145 MOORE AVE.
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIRNSCHILD, THOMAS B
Address: 585 BANANA BLVD.
City-St-Zip: MERRITT ISLAND, FL 32952

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS B. FIRNSCHILD

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date