

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000091663

Entity Name: ANYTIME LOCK, KEY, & SAFE, INC

FILED
Jun 29, 2009
Secretary of State

Current Principal Place of Business:

1108 CASSAT AVE
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

Current Mailing Address:

1108 CASSAT AVE
JACKSONVILLE, FL 32205 US

New Mailing Address:

FEI Number: 26-0712943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, BRAILEY
498 ACACIA STREET
ST. AUGUSTINE, FL 32080 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, JEFFREY L
Address: 1751 ST LAWRENCE WAY
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP (X) Delete
Name: BRAILEY, WARREN
Address: 498 ACACIA STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR (X) Delete
Name: ELLISON, MORRIS
Address: 1108 CASSAT AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGR () Delete
Name: BRAILEY, DANIEL
Address: 800 WHISPERING CIRCLE #13
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRAILEY, WARREN D
Address: 498 ACACIA STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: WARREN BRAILEY

P

06/29/2009

Electronic Signature of Signing Officer or Director

Date