

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000032541

**Entity Name:** PULFORD SECURITY, INC.

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 27-1827004

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWAN, LAWRENCE  
14132 CREEK COURT  
FORT MYERS, FL 33908 US

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

SWAN, LAWRENCE  
709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914 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: LAWRENCE SWAN

01/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: PULFORD, ANDREW W  
Address: 9059 WILDWOOD LAKE DR  
City-St-Zip: WHITMORE LAKE, MI 48189

Title: D  
Name: PULFORD, ANDREW W  
Address: 9059 WILDWOOD LAKE DR  
City-St-Zip: WHITMORE LAKE, MI 48189

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: ANDREW PULFORD

P

01/09/2012

Electronic Signature of Signing Officer or Director

Date