

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000070272

Entity Name: A 24/7 LOCK POPPERS, INC.

FILED
Apr 04, 2012
Secretary of State

Current Principal Place of Business:

1364 N. US HIGHWAY 1, SUITE 505
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1364 N. US HIGHWAY 1, SUITE 505
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 27-3963144 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JOHN C
1364 N. US HIGHWAY 1, SUITE 505
ORMOND BEACH, FL 32174 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
Name: WALDEN, PATRICK
Address: 1364 N. US HIGHWAY 1, SUITE 505
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP
Name: SMITH, JOHN C
Address: 1364 N. US HIGHWAY 1, SUITE 505
City-St-Zip: ORMOND BEACH, FL 32174

Title: SEC
Name: WALDEN, MARISSA A
Address: 1364 N. US HIGHWAY 1, SUITE 505
City-St-Zip: ORMOND BEACH, FL 32174

Title: TREA
Name: WALDEN, MARISSA A
Address: 1364 N. US HIGHWAY 1, SUITE 505
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP
Name: JOHN, WALDEN
Address: 1364 N US HIGHWAY 1, SUITE 505
City-St-Zip: ORMOND BEACH, FL 32174

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: JOHN WALDEN

_____ Electronic Signature of Signing Officer or Director

VP

04/04/2012

_____ Date