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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # P37695 (4)

1. Corporation Name

ADT AUTOMOTIVE, INC.

Principal Place of Business

435 METROPLEX DRIVE  
NASHVILLE TN 37211  
US

Mailing Address

435 METROPLEX DRIVE  
NASHVILLE TN 37211



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
02/28/1992

3a. Date of Last Report  
04/28/1995

4. FEI Number

51-0265897

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME RICHARDSON, MICHAEL J.  
STREET ADDRESS 435 METROPLEX DRIVE  
CITY-ST-ZIP NASHVILLE TN

TITLE CEO ☐ DELETE

NAME RICHARDSON, MICHAEL J.  
STREET ADDRESS 435 METROPLEX DRIVE  
CITY-ST-ZIP NASHVILLE TN

TITLE AT ☐ DELETE

NAME RUZKA, STEPHEN J.  
STREET ADDRESS 2255 GLADES ROAD  
CITY-ST-ZIP BOCA RATON FL

TITLE VS ☐ DELETE

NAME LENAR, JEFFREY J.  
STREET ADDRESS 435 METROPLEX DRIVE  
CITY-ST-ZIP NASHVILLE TN

TITLE AS ☐ DELETE

NAME BECK, JAN S.  
STREET ADDRESS 2255 GLADES ROAD  
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 13 if changed, or on the attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan S. Beck, Asst. Sec'y 4/24/96 (607) 997-8406

CR2E034 (12/95)