FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400007310 (3)

SCOTT ALARM OF SAVANNAH, INC.

74 W. MONTGOMERY CROSSROAD SUITE 3-B SAVANNAH GA 31406		*REPUBLIC INDUSTRIES, ATN: TERI M. TRIMMER 200 EAST LAS OLAS BLVD., STE. 1400 -FT. LAUDERDALE FL 33301-2248 -US		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/18/1994	07/03/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 450 E. Las Olas Blvd.		58-2086770	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 Ste. 1200		6. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	,	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Ft. Lauderdal	le, FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for a	ptangible tax under s. 199.032,
24	25	29 33301 30	USA		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	glatered Agent
C T CORPORATION SYSTEM			81 Name		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			82 Street A	ddress (P.O. Box Number is Not Acceptab	ole)
			83		
			84 City		85 Zip Code
					<u> </u>
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 tegistered agen		Registered Agent signature r		DATE
12,	OFFICERS AND		I 13.	ADDITIONS/CHANGES TO OFFIC	
TIFLE	P	DELETE	1.1 TITLE		Change Addition
NAME	SCOTT, BRUCE		1.2 NAME		
STREET ADDRESS	3362 STATE ROAD 13		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	HUDSON, HARRIS W	* .	2.2 NAME		
STREET ADDRESS	200 EAST LAS OLAS BLVD., S	JITE 1400	2.3 STREET ADDRESS	450 E. Las Olas BLvd.,	STA 1200
CITY-ST-ZIF	FORT LAUDERDALE FL 33301		2. 4 CITY - ST - ZIP	Ft. Lauderdale, FL 333	
TITLE	VP	DELETE	3.1 TITLE	TTT TTTTT WHAT A	Change Addition
NAME	HUDSON, HARRIS W		3.2 NAME		•
STREET ADDRESS	200 EAST LAS OLAS BLVD., S	JITE 1400	3.3 STREET ADDRESS	450 E. Las Olas Blvd.,	Ste. 1200
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		3.4. CITY-ST-ZIP	Ft. Lauderdale, FL 333	
TITLE	VP	DELETE	4.1 TITLE		Change Addition
NAME	WELLS, RUSSELL		4. 2 NAME		
STREET ADDRESS	12502 APACHE AVE #42		4.3 STREET ADDRESS		
CITY-ST-ZIP	SAVANNAH GA		4.4 CITY-ST-ZIP		
TITLE	\$	DELETE	5.1 TITLE		Change Addition
NAME	HANDLEY, RICHARD	.—	5.2 NAME		
STREET ADDRESS	200 EAST LAS OLAS BLVD., S	JITE 1400	5.3 STREET ADDRESS	450 E. Las Olas Blvd.,	Ste. 1200
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 333	
TITLE		DELETE	6.1 TITLE	*** TRAMETABLE! LT 333	Change Addition
NAME			6,2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-ST-ZIP			6.4 CATY-ST-ZIP		
14. I do nerek	by certify that the information supplied	with this filing does not qualify	for the exemption st	ated in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatio	o indicated on this annual report or su	inglamantal annual rannet le true	and accurate and	that my signature shall have the same lega eport as required by Chapter 607, Florida S	al effect as if made under outh that

Richard L. Handley