

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000016219

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** SPECIALIZED SYSTEMS, INC.

**Current Principal Place of Business:**

13749 FOLKSTONE CIRCLE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

13749 FOLKSTONE CIRCLE  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-0899009      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SIMPSON, TERRY L  
13749 FOLKSTONE CIRCLE  
WELLINGTON, FL 33414    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:** PD  
**Name:** SIMPSON, TERRY L  
**Address:** 13749 FOLKSTONE CIRCLE  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** TD  
**Name:** SIMPSON, REBECCA  
**Address:** 13749 FOLKSTONE CIRCLE  
**City-St-Zip:** WELLINGTON, FL 33414

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: TERRY L. SIMPSON

PRES

04/02/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date