

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000076145

Entity Name: UNIT ONE SECURITY, INC.

FILED  
Jul 22, 2004  
Secretary of State

## Current Principal Place of Business:

9951 ATLANTIC BLVD  
STE. 254  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

11412 HARTS ROAD  
JACKSONVILLE, FL 32218

## New Mailing Address:

FEI Number: 59-3586859

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REDMON, TOLLIE R  
11412 HARTS RD.  
JACKSONVILLE, FL 32218 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: REDMON, TOLLIE R  
Address: 10621 MONACO DRIVE, #43  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VT ( ) Delete  
Name: REDMON, SHARON G  
Address: 10621 MONACO DRIVE, #43  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: TIGGS, HERBERT C  
Address: 2603 VILLA CIRCLE  
City-St-Zip: NORFOLK, VA 23504

Title: D ( ) Delete  
Name: TIGGS, SHAWN P  
Address: 2603 VILLA CIRCLE  
City-St-Zip: NORFOLK, VA 23504

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHARON G. REDMON

VP

07/22/2004

Electronic Signature of Signing Officer or Director

Date