

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20604

FILED  
Feb 13, 2009  
Secretary of State

Entity Name: MASTER SECURITY CENTRAL, INC.

## Current Principal Place of Business:

911 E DAYTON CIR  
FT LAUDERDALE, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

911 E DAYTON CIR  
FT LAUDERDALE, FL 33312

## New Mailing Address:

FEI Number: 65-0238908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STODDARD, E. J  
911 E. DAYTONA CIRCLE  
FT LAUDERDALE, FL 33312 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STODDARD, E. JANE,  
Address: 911 E DAYTON CIR  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: STODDARD, GAIAN  
Address: 911 E. DAYTON CIRCLE  
City-St-Zip: FT. LAUDERDALE, FL

Title: D ( ) Delete  
Name: STODDARD, FLORAJEAN  
Address: 911 E. DAYTONA CIRCLE  
City-St-Zip: FT. LAUDERDALE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STODDARD, E. JANE,  
Address: 911 E DAYTON CIR  
City-St-Zip: FT LAUDERDALE, FL

Title: D (X) Change ( ) Addition  
Name: STODDARD, GARY ALAN  
Address: 911 E. DAYTON CIRCLE  
City-St-Zip: FT. LAUDERDALE, FL

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EVODIA JANE STODDARD

P

02/13/2009

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

\_\_\_\_\_  
Date