

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736383

**Entity Name:** ALARM ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

1830 N UNIVERSITY DR. PMB 329  
PLANTATION, FL 33322

**Current Mailing Address:**

1830 NORTH UNIVERSITY DRIVE  
PMB 329  
PLANTATION, FL 33322 US

**FEI Number:** 59-1877381

**Certificate of Status Desired:** No

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

FEW, SHANNON  
1830 NORTH UNIVERSITY DRIVE  
SUITE 329  
PLANTATION, FL 33322 US

*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:** SHANNON FEW

02/09/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRES  
Name ASTROM, MARK  
Address 1032 SOUTH MAIN STREET  
City-State-Zip: GAINESVILLE FL 32601

Title VP  
Name DEL PINO, DIEGO  
Address 4679 SW 72ND AVENUE  
City-State-Zip: MIAMI FL 33155

Title PRESIDENT  
Name SMITH, MARVIN  
Address 7065 WESTPOINTE BLVD.  
SUITE 318  
City-State-Zip: ORLANDO FL 32835

Title EXECUTIVE DIRECTOR  
Name FEW, SHANNON  
Address 1361 W. WADE HAMPTON BLVD.  
SUITE F, BOX 3  
City-State-Zip: GREER SC 26950

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHANNON FEW

EXECUTIVE DIRECTOR

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date