

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041989

Entity Name: COMPLETE ACCESS CONTROL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1438 HAMLIN AVENUE
ST CLOUD, FL 34771

Current Mailing Address:

1438 HAMLIN AVENUE
ST CLOUD, FL 34771 US

FEI Number: 54-2106354

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MAURO, KAREN P
3004 SUMMER SWAN DR
ORLANDO, FL 32825 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name MAURO, KAREN P
Address 3004 SUMMER SWAN DR
City-State-Zip: ORLANDO FL 32825

Title VP
Name MAURO, CHRISTIAN CASEY MR.
Address 4564 HICKORY TREE ROAD
City-State-Zip: SAINT CLOUD FL 34772

Title DVP
Name MAURO, VINCENT F
Address 3004 SUMMER SWAN DR.
City-State-Zip: ORLANDO FL 32825

Title VP
Name APY, KANDICE MAURO
Address 4913 SCENIC VISTA DRIVE
City-State-Zip: SAINT CLOUD FL 34771

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: KAREN MAURO

PRESIDENT

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date