

2013 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M07000006804

Entity Name: SECURITY NETWORKS ACCEPTANCE LLC

Current Principal Place of Business:

3223 COMMERCE PLACE
SUITE 101
WEST PALM BEACH, FL 33407

Current Mailing Address:

3223 COMMERCE PLACE
SUITE 101
WEST PALM BEACH, FL 33407

FEI Number: 26-1399183

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title CFO
Name WIESENFELD, KENNETH
Address 3223 COMMERCE PLACE SUITE 101
City-State-Zip: WEST PALM BEACH FL 33407

Title CEO
Name HAISLIP, MICHAEL
Address 2350 VALLEY VIEW SUITE 100
City-State-Zip: DALLAS TX 75234

Title EXECUTIVE VP & ASSISTANT SECRETARY
Name MEYERS, MICHAEL
Address 2350 VALLEY VIEW SUITE 100
City-State-Zip: DALLAS TX 75234

Title EXECUTIVE VP & SECRETARY
Name NILES, WILLIAM
Address 2350 VALLEY VIEW SUITE 100
City-State-Zip: DALLAS TX 75234

Title VP, FINANCE
Name VERRET, DAVID
Address 2350 VALLEY VIEW SUITE 100
City-State-Zip: DALLAS TX 75234

Title VP, OPERATIONS
Name BECKER, KURT W
Address 3223 COMMERCE PLACE SUITE 101
City-State-Zip: WEST PALM BEACH FL 33407

Title VP
Name SHERMAN, ROBERT
Address 2350 VALLEY VIEW SUITE 100
City-State-Zip: DALLAS TX 75234

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KURT W. BECKER

VP, OPERATIONS

09/27/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date