

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J68675

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** A-1 ACCESS CONTROL SYSTEMS, INC.

**Current Principal Place of Business:**

5022 20TH AVENUE SOUTH  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

5022 20TH AVENUE SOUTH  
TAMPA, FL 33619 US

**New Mailing Address:**

FEI Number: 59-2803272

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLINE, JOHN  
5022 20TH AVENUE SOUTH  
TAMPA, FL 33619 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CLINE, JOHN  
Address: 8009 RIVERWOOD ESTATE PLACE  
City-St-Zip: RIVERVIEW, FL 33569

Title: DV  
Name: ADAMS, JEFF A.  
Address: 4603 POINSETTIA AVENUE  
City-St-Zip: TEMPLE TERRACE, FL 33617

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: JOHN A. CLINE

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

DP

03/22/2011

\_\_\_\_\_  
Date