

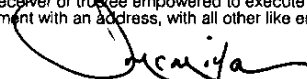


FILED
Apr 26, 2005 8:00 am
Secretary of State

14000034

DOCUMENT # F01000001717				04-26-2005 90184 007 ***158.75	
1. Entity Name DEVCON SECURITY SERVICES CORP.					
Principal Place of Business 798 AIRPORT ROAD PANAMA CITY, FL 32405		Mailing Address 798 AIRPORT ROAD ATTN: TIM PANAMA CITY, FL 32405			
2. Principal Place of Business 1350 E. Newport Center Dr. Suite, Apt. #, etc. Suite 201 City & State Deerfield Beach, FL Zip 33442 Country Broward		3. Mailing Address Attn: Janett McMillan Suite, Apt. #, etc. City & State City Country Country		14000034  04222005 Chg-P CR2E034 (10/03) 4. FEI Number 65-1090649 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUZIKA, STEPHEN J 336 KEY PALM ROAD BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, Asst. Secretary J. Keith Godsey 1350 E. Newport Center Dr., Ste. 201 Deerfield Beach, FL 33442 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XVS VDT DANNEBERG, JOHN E 1 VALENCIA COURT SKILLMAN, NJ 08558 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Janett McMillan 1350 E. Newport Center Dr., Ste. 201 Deerfield Beach, FL 33442 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SCHOENFIELD, ELI D 260 MADISON AVENUE NEW YORK, NY 10016 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Janett McMillan Secretary		4/22/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	