

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055018

FILED
Jul 06, 2006
Secretary of State

Entity Name: FORENSICS OPERATIONAL GROUP AND SECURITY, INC.

Current Principal Place of Business:

1769 LEYBURN CT.
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 600,674
JACKSONVILLE, FL 32260

New Mailing Address:

FEI Number: 14-1884140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAUGHN, DAVID
1769 LEYBURN CT.
JACKSONVILLE, FL 32223 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR. () Delete
Name: GOODWIN, EDWARD C
Address: 3528 RIVERWOOD CRESCENT
City-St-Zip: CHESAPEAKE, VA 23322

Title: MR. () Delete
Name: VAUGHN, DAVID C
Address: 1769 LEYBURN CT.
City-St-Zip: JACKSONVILLE, FL 32223

Title: MR. () Delete
Name: KARSHNER, JOHN
Address: 945 LAWHON DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: MR. () Delete
Name: WHITENER, JAMES
Address: 1513 POPLAR RIDGE CIRCLE
City-St-Zip: BLACKSBURG, VA 24060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID VAUGHN

D

07/06/2006

Electronic Signature of Signing Officer or Director

Date