

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000072177

FILED
Apr 27, 2006
Secretary of State

Entity Name: SIGNPOST SECURITY SOLUTIONS, INC.

Current Principal Place of Business:

P.O. BOX 691203
ORLANDO, FL 328691203

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 691203
ORLANDO, FL 328691203

New Mailing Address:

FEI Number: 51-0544091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUCY, MARISSA O
10525 DEMILO PLACE APT 202
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

SOUCY, MARISSA O
331 EMERALD SHORES CIRCLE
APT 102
OCOOE, FL 34761 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: MARISSA SOUCY

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOUCY, JASON M
Address: P.O. BOX 691203
City-St-Zip: ORLANDO, FL 328691203

Title: V () Delete
Name: BRUNET, MICHAEL A
Address: P.O. BOX 691203
City-St-Zip: ORLANDO, FL 328691203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JASON M. SOUCY

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date