
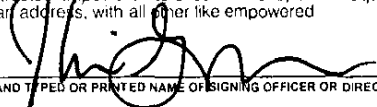


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 8:00 am
Secretary of State

01-20-2006 90033 016 ***150.00

DOCUMENT # P07558					
1. Entity Name NETWORK MULTI-FAMILY SECURITY CORPORATION					
Principal Place of Business 4221 W. JOHN CARPENTER FREEWAY IRVING, TX 75063 US			Mailing Address 4221 W. JOHN CARPENTER FREEWAY IRVING, TX 75063 US		
2. Principal Place of Business			3. Mailing Address		
Suite Apt #, etc			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				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, 2006 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	PD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILLIAMS, STEVE		NAME	<i>See Attached</i>	
STREET ADDRESS	4221 W JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
TITLE	VPST	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PARKER, STEPHEN D		NAME		
STREET ADDRESS	4221 W. JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JAMES, KELLY		NAME		
STREET ADDRESS	4221 W. JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SOMMA, ANTHONY D		NAME		
STREET ADDRESS	4221 W. JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHIPPLE, CHRISTOPHER J		NAME		
STREET ADDRESS	4221 W. JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
TITLE	AST	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COUCH, CYNTHIA		NAME		
STREET ADDRESS	4221 W JOHN CARPENTER FRWY		STREET ADDRESS		
CITY-ST-ZIP	IRVING, TX 75063		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Date: <i>1/17/2006</i>		Daytime Phone #: <i>972-946-6121</i>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

ATTACHMENT
40004108
P07558

**Network Multi-Family Security Corporation
Company Officer Information**

<u>Title</u>	<u>Name</u>	<u>Business Address</u>	<u>Residence Address</u>
President	Richard I. Ginsburg	1035 N. 3 rd Street, Suite 101 Lawrence, KS 66044 Bus. (785) 856-5500	3949 194 th Lane Golden Beach, FL 33160 Res. (305) 933-8003
Vice President	Darius G. Nevin	1035 N. 3 rd Street, Suite 101 Lawrence, KS 66044 Bus. (785) 856-5500	1410 Palancia Avenue Coral Gables, FL 33146 Res. (305) 668-0603
Vice President, Treasurer, Asst. Secretary	Eric A. Devin	1035 N. 3 rd Street, Suite 101 Lawrence, KS 66044 Bus. (785) 856-5500	3045 West 7 th Street Lawrence, KS 66049 Res. (785) 749-3319
Vice President, Secretary	John E. Griffin	4221 W. John Carpenter Fwy Irving, TX 75063 Bus. (972) 916-6154	7242 Tophill Lane Dallas, Texas 75248 Res. (972) 233-9311