

2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED

04 JAN 20 PM 1:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P40046

1. Entity Name
SENTINEL SECURITY PLANS, INC.



Principal Place of Business
**1929 ALLEN PARKWAY
9TH FLOOR DEPT 2934
HOUSTON, TX 77019**

Mailing Address
**1929 ALLEN PARKWAY
9TH FLOOR DEPT 2934
HOUSTON, TX 77019**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

01062004 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
62-1264104

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	MARCH, KENNETH A 1929 ALLEN PKWY HOUSTON, TX 77019		
V	ALLEN, JOSEPH 1929 ALLEN PKWY HOUSTON, TX 77019		
S	MARSHALL, JUDITH M 1929 ALLEN PARKWAY HOUSTON, TX 77019		
T	LORING, HARRIS E III 1929 ALLEN PKWY, 9TH FLOOR HOUSTON, TX 77016		
VD	MURPHY, DANIEL J 1929 ALLEN PKWY HOUSTON, TX 77019	D	KATHLEEN S ISAAC 1929 ALLEN PARKWAY HOUSTON TX 77019
VD	JONES, FRANK C DEPT 2934 9TH FLOOR 1929 ALLEN PARKWAY HOUSTON, TX 77019	D	KENNETH A MARCH 1929 ALLEN PARKWAY HOUSTON TX 77019

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01/23/04--01015--008 **150.00

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: HARRIS E LORING III Date: 1/8/04 Daytime Phone #: 713-522-5141