

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000063656

FILED
Jan 16, 2002 8:00 AM
Secretary of State

Entity Name: C.K.'S SECURITY SYSTEMS, INC.

Current Principal Place of Business:

301 SE 4TH ST
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

1934 COMMERCE LANE
STE 2
JUPITER, FL 33458 US

New Mailing Address:

301 SE 4TH ST
BOYNTON BEACH, FL 33435 US

FEI Number: 65-0854572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, ROBERT K
301 SE 4TH STREET
BOYNTON BEACH, FL 33435

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: STEPHENS, ROBERT
Address: 301 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435

Title: PD () Delete
Name: VOLPE, FRANCIS B
Address: 301 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435

Title: EV () Delete
Name: SCLAFANO, ROBERT
Address: 301 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S () Delete
Name: VOLPE, CHRISTINE
Address: 301 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T () Delete
Name: STEPHENS, TINA
Address: 301 SE 4TH ST
City-St-Zip: BOYNTON BEACH, FL 33435

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:

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 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 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: ROBERT K STEPHENS

VD

01/16/2002

Electronic Signature of Signing Officer or Director

_____ Date