2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2008
Secretary of State

DOCUMENT# 748869

Entity Name: REGENCY PARK SECURITY PATROL, INC.

Current Principal Place of Business:

10240 REGENCY PARK BLVD.
PT. RICHEY, FL 34668 US

New Principal Place of Business:

Current Mailing Address:

C/O SECURITY TREASURER
10240 REGENCY PARK BLVD.
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRICK, PETER O
1511 REGENCY PARK BLVD
PT RICHEY, FL 33568 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	HAVEE, GAIL	
Address:	9816 LAKEDSIDE LANE	
City-St-Zip:	PORT RICHEY, FL 34668 US	
Title:	VP	( ) Delete
Name:	HAVEE, RICHARD W VP	
Address:	9816 LAKESIDE LN	
City-St-Zip:	PORT RICHEY, FL 34668 US	
Title:	SD	( ) Delete
Name:	WILLIAMS, KATHLEEN	
Address:	9907 LAKE CHRISE LANE	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	D	( ) Delete
Name:	GRAHAM, EDWARD B.,	
Address:	7335 WESTCOTT DRIVE	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	PD	( ) Delete
Name:	HAVEE, GAIL	
Address:	9816 LAKESIDE LANE	
City-St-Zip:	PORT RICHEY, FL 34668 US	
Title:	TD	( ) Delete
Name:	O'CONNELL, DORIS	
Address:	10011 GLEN MOOR DR.	
City-St-Zip:	PORT RICHEY, FL 34668	

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAIL HAVEE P 01/05/2008

Electronic Signature of Signing Officer or Director — Date