

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855029

FILED
Apr 18, 2006
Secretary of State

Entity Name: BURNS INTERNATIONAL SECURITY SERVICES CORPORATION

Current Principal Place of Business:

2 CAMPUS DRIVE
PARSIPPANY, NJ 07054 US

New Principal Place of Business:

4330 PARK TERRACE DRIVE
WESTLAKE VILLAGE, CA 91361 US

Current Mailing Address:

4330 PARK TERRACE DRIVE
WESTLAKE VILLAGE, CA 91361

New Mailing Address:

FEI Number: 36-3179778 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERENS, RICHARD
Address: 4330 PARK TERRACE DRIVE
City-St-Zip: WESTLAKE VILLAGE, CA 91361

Title: VPSD () Delete
Name: FOX, JAMES H
Address: 4330 PARK TERRACE DR
City-St-Zip: WESTLAKE VILLAGE, CA 91361

Title: T () Delete
Name: CANTLON, THOMAS
Address: TWO CAMPUS DR
City-St-Zip: PARSIPPANY, NJ 07054

Title: AS () Delete
Name: PARK, ALBERT Y
Address: 4330 PARK TERRACE DR
City-St-Zip: WESTLAKE VILLAGE, CA 91361

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:

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: ALBERT Y. PARK

AS

04/18/2006

Electronic Signature of Signing Officer or Director

_____ Date