

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855029

FILED
Apr 23, 2009
Secretary of State

Entity Name: BURNS INTERNATIONAL SECURITY SERVICES CORPORATION

Current Principal Place of Business:

TWO CAMPUS DRIVE
PARSIPPANY, NJ 07054 US

New Principal Place of Business:

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: CANTLON, THOMAS C
Address: TWO CAMPUS DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

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 C
Address: TWO CAMPUS DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES H. FOX

_____ Electronic Signature of Signing Officer or Director

VPSD

04/23/2009

_____ Date