

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003450

FILED
Jun 09, 2009
Secretary of State

Entity Name: PINKERTON & LAWS OF FLORIDA, INC.

Current Principal Place of Business:

1165 NORTHCHASE PKWY., SUITE 100
MARIETTA, GA 30067

New Principal Place of Business:

Current Mailing Address:

1165 NORTHCHASE PKWY., SUITE 100
MARIETTA, GA 30067

New Mailing Address:

FEI Number: 58-0666948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAIG, MATTHEW
901 N. LAKE DESTINY RD., SUITE 301
MAITLAND, FL 32751 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COIL, LAWRENCE D
Address: 1165 NORTHCHASE PKWY., SUITE 100
City-St-Zip: MARIETTA, GA 30067

Title: ST () Delete
Name: HILDERBRAND, PATRICIA A
Address: 1165 NORTHCHASE PKWY., SUITE 100
City-St-Zip: MARIETTA, GA 30067

Title: V () Delete
Name: JERNIGAN, JEFFREY S
Address: 1165 NORTHCHASE PKWY., SUITE 100
City-St-Zip: MARIETTA, GA 30067

Title: V (X) Delete
Name: CRAIG, MATTHEW C
Address: 901 N LAKE DESTINY DRIVE #301
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRAIG, MATTHEW C
Address: 901 NORTH LAKE DESTINY DRIVE, #301
City-St-Zip: MAITLAND, FL 32751

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

Title: VP (X) Change () Addition
Name: JERNIGAN, JEFFREY S
Address: 1165 NORTHCHASE PKWY., SUITE 100
City-St-Zip: MARIETTA, GA 30067

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: PATRICIA A. HILDERBRAND

ST

06/09/2009

Electronic Signature of Signing Officer or Director

Date