

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005793

FILED
Apr 14, 2008
Secretary of State

Entity Name: GARDA SECURITY INC.

Current Principal Place of Business:

10467 WHITE GRANITE DR.
OAKTON, VA 22124

New Principal Place of Business:

5870 TRINITY PARKWAY SUITE 300
CENTREVILLE, VA 20120

Current Mailing Address:

10467 WHITE GRANITE DR.
OAKTON, VA 22124

New Mailing Address:

5870 TRINITY PARKWAY SUITE 300
CENTREVILLE, VA 20120

FEI Number: 54-1497712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MOORE, OBIE R III
Address: 10467 WHITE GRANITE DR.
City-St-Zip: OAKTON, VA 22124

Title: SDGC () Delete
Name: WEGNER, BRENT A
Address: 10467 WHITE GRANITE DR.
City-St-Zip: OAKTON, VA 22124

Title: T () Delete
Name: RAY, DEBORAH
Address: 10467 WHITE GRANITE DR.
City-St-Zip: OAKTON, VA 22124

Title: VP () Delete
Name: SHEPPARD, LEMARGUE
Address: 10467 WHITE GRANITE DR.
City-St-Zip: OAKTON, VA 22124

Title: ASAC () Delete
Name: DENHARDT, DANIELLE A
Address: 10467 WHITE GRANITE DR.
City-St-Zip: OAKTON, VA 22124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOORE, OBIE R III
Address: 5870 TRINITY PARKWAY SUITE 300
City-St-Zip: CENTREVILLE, VA 20120

Title: SDGC (X) Change () Addition
Name: WEGNER, BRENT A
Address: 5870 TRINITY PARKWAY SUITE 300
City-St-Zip: CENTREVILLE, VA 20120

Title: TREA (X) Change () Addition
Name: RAY, DEBORAH
Address: 5870 TRINITY PARKWAY SUITE 300
City-St-Zip: CENTREVILLE, VA 20120

Title: VP (X) Change () Addition
Name: SHEPPARD, LEMARGUE
Address: 5870 TRINITY PARKWAY SUITE 300
City-St-Zip: CENTREVILLE, VA 20120

Title: FSO (X) Change () Addition
Name: COATES, FRANCIS, JR.
Address: 5870 TRINITY PARKWAY SUITE 300
City-St-Zip: CENTREVILLE, VA 20120

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: OBIE R. MOORE III

PRES

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date