

FILED

Apr 03, 2002 8:00 am  
Secretary of State

03-05-2002 90088 001 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000001717

1. Entity Name

SECURITY EQUIPMENT COMPANY, INC.

Principal Place of Business

336 KEY PALM ROAD  
BOCA RATON FL 33432

Mailing Address

336 KEY PALM ROAD  
BOCA RATON FL 33432

2. Principal Place of Business

798 Airport Rd  
Suite, Apt. #, etc.

3. Mailing Address

798 Airport Rd  
Suite, Apt. #, etc.

City &amp; State

Panama City FL

City &amp; State

Panama City FL

4. FEI Number

65-1090649

Applied For

Not Applicable

Zip

32405

Country

USA

Zip

32405

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/17/02

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME RUZKA, STEPHEN J  
STREET ADDRESS 336 KEY PALM ROAD  
CITY-ST-ZIP BOCA RATON FL 33432 ☐ DeleteTITLE VSD  
NAME DANNEBERG, JOHN E  
STREET ADDRESS 5 NICKLAUS COURT  
CITY-ST-ZIP FLORHAM PARK NJ 07932 ☐ DeleteTITLE V  
NAME MCCLAIN, HENRY H III  
STREET ADDRESS 4308 GREENLEAF CIRCLE  
CITY-ST-ZIP PANAMA CITY FL 32404 ☒ DeleteTITLE V  
NAME FRALICK, ALFRED N  
STREET ADDRESS 8211 HIGH POINT ROAD  
CITY-ST-ZIP PANAMA CITY FL 32405 ☒ DeleteTITLE AS  
NAME SCHOENFELD, ELI D  
STREET ADDRESS ONE DAG HAMMARSKJOLD PLAZA  
CITY-ST-ZIP NEW YORK NY 10017 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)