2008 FOR PROFIT CORPORATION ANNUAL REPORT

May 22, 2008 8:00 am Secretary of State DOCUMENT # F03000000825 05-22-2008 90020 042 ***158.75 HDR SECURITY OPERATIONS, INC. Mailing Address Principal Place of Business 315 E ROBINSON ST 8404 INDIAN HILLS DRIVE OMAHA, NE 68114-4098 ORLANDO, FL 32801 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 41-2036409 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE PΠ ☐ Delete TITLE ☐ Change ■ Addition NAME BELL RICHARD R NAME STREET ADDRESS 8404 INDIAN HILLS DRIVE STREET ADDRESS CITY-ST-ZIP OMAHA, NE 681144098 CITY-ST-ZIP DEVP Director/Exec Vice President Richard J. Vensas TITLE ☐ Delete TITLE ☐ Addition VENSAS, RICHARD J 5151 FLYNN PKWY., SUITE 314 STREET ADDRESS STREET ADDRESS 1555 N. Carancahua Ste 1650 CITY-ST-ZIP CORPUS CHRISTI, TX 78411 CITY-ST-ZIP Corpus Christi, TX 78478 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PACHMAN, LOUIS J NAME STREET ADDRESS 8404 INDIAN HILLS DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OMAHA, NE 681144098 ☐ Chance ☐ Addition TITLE ☐ Delete TITLE LACEY, WENDY L NAME NAME STREET ADDRESS 8404 INDIAN HILLS DRIVE STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP OMAHA, NE 681144098 ☐ Addition ☐ Delete BACHMAN, MERLE S NAME NAME STREET ADDRESS 8404 INDIAN HILLS DR. STREET ADDRESS **OMAHA, NE 68114** CITY-\$1-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE LITTLE, GEORGE A NAME NAME 8404 INDIAN HILLS DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OMAHA, NE 681144098 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FFICER OR DIRECTOR

4/17/08 Date

402/399-1000

Daytime Phone #

FILED