

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003673

FILED
Feb 28, 2007
Secretary of State

Entity Name: CASTLEROCK SECURITY GROUP, INC.

Current Principal Place of Business:

1821 WALDEN OFFICE SQUARE, SUITE 400
SCHAUMBURG, IL 60173

New Principal Place of Business:

Current Mailing Address:

1821 WALDEN OFFICE SQUARE, SUITE 400
SCHAUMBURG, IL 60173

New Mailing Address:

FEI Number: 32-0080371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD () Delete
Name: GROSS, RAYMOND A
Address: 7495 PORTO VECCHIO PLACE
City-St-Zip: DELRAY BACH, FL 33446

Title: PD () Delete
Name: GERMAN, JAMES M
Address: 10 HUBBELL COURT
City-St-Zip: BARRINGTON, IL 60010

Title: STD () Delete
Name: TALCOTT, RANDALL L
Address: 4641 N. MAGNOLIA AVE.
City-St-Zip: CHICAGO, IL 60640

Title: DAS () Delete
Name: LUCKING, PAUL M
Address: 1003 LOCKOUT RIDGE PRIVATE DRIVE
City-St-Zip: BRENTWOOD, TN 37027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: GROSS, RAYMOND A
Address: 2101 S. ARLINGTON HEIGHTS RD., SUITE 150
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

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

Title: STD (X) Change () Addition
Name: TALCOTT, RANDALL L
Address: 2101 S. ARLINGTON HEIGHTS RD., SUITE 150
City-St-Zip: ARLINGTON HEIGHTS, IL 60005

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA S. BELLNER

LC

02/28/2007

Electronic Signature of Signing Officer or Director

_____ Date