2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003673

Entity Name: CASTLEROCK SECURITY GROUP, INC.

FILED Feb 28, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1821 WALDEN OFFICE SQUARE, SUITE 400 SCHAUMBURG, IL 60173

Current Mailing Address: New Mailing Address:

1821 WALDEN OFFICE SQUARE, SUITE 400 SCHAUMBURG, IL 60173

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: CD (X) Change () Addition

Name: GROSS, RAYMOND A Name: GROSS, RAYMOND A

Address: 7495 PORTO VECCHIO PLACE Address: 2101 S. ARLINGTON HEIGHTS RD., SUITE 150

City-St-Zip: DELRAY BACH, FL 33446 City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: PD () Delete Title: () Change () Addition

 Name:
 GERMAN, JAMES M
 Name:

 Address:
 10 HUBBELL COURT
 Address:

 City-St-Zip:
 BARRINGTON, IL 60010
 City-St-Zip:

Name: TALCOTT, RANDALL L Name: TALCOTT, RANDALL L

Address: 4641 N. MAGNOLIA AVE. Address: 2101 S. ARLINGTON HEIGHTS RD., SUITE 150

City-St-Zip: CHICAGO, IL 60640 City-St-Zip: ARLINGTON HEIGHTS, IL 60005

Title: DAS () Delete Title: () Change () Addition

 Name:
 LUCKING, PÀÚL M
 Name:

 Address:
 1003 LOCKOUT RIDGE PRIVATE DRIVE
 Address:

 City-St-Zip:
 BRENTWOOD, TN 37027
 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