

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006631

FILED
May 04, 2007
Secretary of State

Entity Name: YALE ENFORCEMENT SERVICES, INC.

Current Principal Place of Business:

3601 NORTH BELT WEST
BELLEVILLE, IL 62226

New Principal Place of Business:

Current Mailing Address:

8019 N. HIMES AVE., STE. 401
TAMPA, FL 336142762

New Mailing Address:

FEI Number: 37-0995579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORROW, LORI J MANAGER
8019 N. HIMES AVE., STE. 401
TAMPA, FL 336142762 US

Name and Address of New Registered Agent:

MORROW, LORI J MANAGER
8019 N. HIMES AVE.,
STE 401
TAMPA, FL 336142762 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:

05/04/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: YALE, BARBARA
Address: 3601 NORTH BELT WEST
City-St-Zip: BELLEVILLE, IL 62226

Title: VD () Delete
Name: KRNETA, JENNIFER
Address: 3601 NORTH BELT WEST
City-St-Zip: BELLEVILLE, IL 62226

Title: ST () Delete
Name: YALE, CHRISTOPHER
Address: 3601 NORTH BELT WEST
City-St-Zip: BELLEVILLE, IL 62226

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: YALE, BARBARA
Address: 3601 NORTH BELT WEST
City-St-Zip: BELLEVILLE, IL 62226

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

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

Title: PRES () Change (X) Addition
Name: YALE, RICK A
Address: 3601 NORTH BELT WEST
City-St-Zip: BELLEVILLE, IL 62226

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: BARBARA YALE

DIR

05/04/2007

Electronic Signature of Signing Officer or Director

Date