2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2009
Secretary of State

DOCUMENT# F07000004427

Entity Name: HAWKEYE SECURITY DEPOT INC

Current Principal Place of Business:

600 HOUZE WAY
STE E-2
ROSWELL, GA 30076

New Principal Place of Business:

Current Mailing Address:

600 HOUZE WAY
STE E-2
ROSWELL, GA 30076

New Mailing Address:

FEI Number: 58-2427185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GISCLAIR, JAMES N
3800 HWY 98
STE 209
MEXICO BEACH, FL 32410 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

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: P ( ) Delete
Name: GISCLAIR, JAMES N
Address: 605 GLENDALOUGH CT
City-St-Zip: ALPHARETTA, GA 30004

Title: V ( ) Delete
Name: THOMAS, FRANK S
Address: 6625 SCOTTS FIELD
City-St-Zip: CUMMING, GA 30040

Title: S ( ) Delete
Name: GISCLAIR, JAMES N
Address: 605 GLENDRLOUGH CT
City-St-Zip: ALPHARETTA, GA 30004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: GISCLAIR, JAMES N
Address: 605 GLENDALOUGH CT
City-St-Zip: ALPHARETTA, GA 30004

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: JAMES N. GISCLAIR P 06/18/2009

Electronic Signature of Signing Officer or Director — Date