

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001369

FILED
Jun 30, 2009
Secretary of State

Entity Name: G4S REGULATED SECURITY SOLUTIONS, INC.

Current Principal Place of Business:

4200 WACKENHUT DRIVE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4200 WACKENHUT DRIVE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 26-1821958

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

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: PD () Delete
Name: GIBSON, GRAHAME
Address: 53 LINCOLN STREET
City-St-Zip: HINGHAM, MA 02043

Title: VD () Delete
Name: WILSON, ERIC
Address: 5540 BELLFLOWER CT
City-St-Zip: JUPITER, FL 34990

Title: SD () Delete
Name: PAYNE, JULIE T
Address: 18229 SE HERITAGE WAY
City-St-Zip: TEQUESTA, FL 33469

Title: TD () Delete
Name: JORGENSEN, SUSANNE
Address: 748 NE 71 STREET
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JULIE T. PAYNE

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06/30/2009

Electronic Signature of Signing Officer or Director

Date