

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001074

Entity Name: CREATIVE SECURITY, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

64 PRATT ST  
MANSFIELD, MA 02048

## New Principal Place of Business:

## Current Mailing Address:

64 PRATT ST  
MANSFIELD, MA 02048

## New Mailing Address:

FEI Number: 05-0369114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KASKY, ROBERT A ESQ  
200 E. LAS OLAS BLVD  
SUITE 1900  
FT LAUDERDALE, FL 33301 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: Y ( ) Delete  
Name: SKLAR, ALAN T  
Address: 2201 MARINA ISLE WAY #206  
City-St-Zip: JUPITER, FL

Title: VD (X) Delete  
Name: SKLAR, S. ELIOT  
Address: 20 COLONIAL WAY  
City-St-Zip: W. FALMOUTH, MA

Title: C ( ) Delete  
Name: GOOTKIND, JUDITH A.  
Address: 87 COLUMBIA AVE  
City-St-Zip: CRANSTON, RI

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SKLAR, ALAN T  
Address: 2201 MARINA ISLE WAY #206  
City-St-Zip: JUPITER, FL

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

Title: S/VP (X) Change ( ) Addition  
Name: GOOTKIND, JUDITH A.  
Address: 87 COLUMBIA AVE  
City-St-Zip: CRANSTON, RI

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUDITH A. GOOTKIND

VP

04/27/2005

Electronic Signature of Signing Officer or Director

Date