

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003856

FILED
Feb 17, 2009
Secretary of State

Entity Name: WEST BOCA SECURITY, INC.

Current Principal Place of Business:

700 UNIVERSE BLVD
ATTN: GENERAL COUNSEL
JUNO BEACH, FL 33408 US

New Principal Place of Business:

700 UNIVERSE BLVD
JUNO BEACH, FL 33408 US

Current Mailing Address:

700 UNIVERSE BLVD
ATTN: ALISSA E. BALLOT
JUNO BEACH, FL 33408 US

New Mailing Address:

700 UNIVERSE BLVD
JUNO BEACH, FL 33408 US

FEI Number: 25-1771886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: DT () Delete
Name: KAHN, JUDITH J
Address: 700 UNIVERSE BLVD
City-St-Zip: JUNO BEACH, FL 33408 US

Title: DCP () Delete
Name: MORRIS, BARBARA M
Address: 4005 KENNETT PIKE, SUITE 220
City-St-Zip: GREENVILLE, DE 19807 US

Title: DV () Delete
Name: HIGGINS, JAMES P
Address: 700 UNIVERSE BLVD
City-St-Zip: JUNO BEACH, FL 33408 US

Title: S () Delete
Name: BRYAN, PATRICK M
Address: 700 UNIVERSE BLVD
City-St-Zip: JUNO BEACH, FL 33408 US

Title: AS () Delete
Name: TANCER, EDWARD F
Address: 700 UNIVERSE BLVD.
City-St-Zip: JUNO BEACH, FL 33408

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:

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: EDWARD F. TANCER

AS

02/17/2009

Electronic Signature of Signing Officer or Director

Date