

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2005 08:00 AM
Secretary of State

DOCUMENT # F97000001872

1. Entity Name
SECURION PROTECTION NETWORK INC.



Principal Place of Business
12700 PARK CENTRAL
DALLAS, TX 75251

Mailing Address
12700 PARK CENTRAL
DALLAS, TX 75251

DO NOT WRITE IN THIS SPACE



04292005 No Chg-P CR2E034 (10/03)

4. FEI Number
75-2588959

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
PEIPER, JEFFREY A
5109 GILLINGHAM DR.
PLANO, TX 75093

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPS
LINSCOTT, DANIEL T
1105 WILDERNESS
RICHARDSON, TX 75080

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HOCK, CRAIG R
7607 QUEENS GARDEN
DALLAS, TX 75241

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
FIELDS, MICHAEL D
2712 DONNINGTON DR.
PLANO, TX 75093

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000358965
05/04/05-80136-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Craig R. Hock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-05

Date

972-386-3991

Daytime Phone #