

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000001567 1. Entity Name STANLEY SECURITY SOLUTIONS, INC.	
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Principal Place of Business 6161 E. 75TH STREET INDIANAPOLIS, IN 46250	Mailing Address 6161 E. 75TH STREET INDIANAPOLIS, IN 46250
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DO NOT WRITE IN THIS SPACE



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number 35-1842918	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

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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 _____ (NOTE: Registered Agent signature required when re-registering) _____ 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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOSWELL, JUSTIN C 6161 E. 75TH STREET INDIANAPOLIS, IN 46250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BEATT, BRUCE H 1000 STANLEY DRIVE NEW BRITAIN, CT 06053
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DEAN, KARA J 6161 E. 75TH STREET INDIANAPOLIS, IN 46250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EPPEL, CHRISTOPHER J 6161 E. 75TH STREET INDIANAPOLIS, IN 46250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUTZLER, SCOTT G 6161 E. 75TH STREET INDIANAPOLIS, IN 46250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ALLAN, DONALD 1000 STANLEY DRIVE NEW BRITAIN, CT 06053

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05/18/05-800006-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Kara J Dean Kara J Dean 4/15/05 (317) 806-3719
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #