

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002655

FILED
Apr 19, 2006
Secretary of State

Entity Name: PINKERTON GOVERNMENT SERVICES, INC.

Current Principal Place of Business:

6850 VERSAR CENTER, SUITE 301
SPRINGFIELD, VA 22151 US

New Principal Place of Business:

Current Mailing Address:

4330 PARK TERRACE DR
WESTLAKE VILLAGE, CA 91361 US

New Mailing Address:

FEI Number: 62-1415679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PCEO () Delete
Name: HARPER, RONALD J
Address: 6850 VERSAR CENTER, SUITE 301
City-St-Zip: SPRINGFIELD, VA 22151

Title: S () Delete
Name: HOWELL, MARK
Address: 6850 VERSAR CENTER, SUITE 301
City-St-Zip: SPRINGFIELD, VA 22151

Title: D () Delete
Name: THUNMAN, NILS R
Address: 6850 VERSAR CTR STE 301
City-St-Zip: SPRINGFIELD, VA 22151

Title: D () Delete
Name: HUGHES, HARLEY A
Address: 6850 VERSAR CTR STE 301
City-St-Zip: SPRINGFIELD, VA 22151

Title: D () Delete
Name: FREEZE, JAMES E
Address: 6850 VERSAR CTR STE 301
City-St-Zip: SPRINGFIELD, VA 22151

Title: CFO () Delete
Name: HARPER, RONALD
Address: 6850 VERSAR CTR STE 301
City-St-Zip: SPRINGFIELD, VA 22151 US

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
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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 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: MARK HOWELL

S

04/19/2006

Electronic Signature of Signing Officer or Director

Date