2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003
Secretary of State

DOCUMENT# G03468

Entity Name: TOP SECURITY, INC.

Current Principal Place of Business:

1520 ARCADIA ST
ORLANDO, FL 328067801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 568621
ORLANDO, FL 328568621

New Mailing Address:

FEI Number: 59-2231824 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMMERSON, CHARLES M II
1520 ARCADIA ST
ORLANDO, FL 328067801

Name and Address of New Registered Agent:

SIMMERSON, CHARLES M II
P.O. BOX 568621
ORLANDO, FL 328568621

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: _____ 04/21/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SIMMERSON, CHARLES M II
Address: 1520 ARACADIA ST
City-St-Zip: ORLANDO, FL 328067801

Title: SD ( ) Delete
Name: SIMMERSON, VICTORIA L
Address: 1520 ARCADIA ST
City-St-Zip: ORLANDO, FL 328067801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CHARLES M. SIMMERSON, II PD 04/21/2003
Electronic Signature of Signing Officer or Director — Date