

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M04381 (3)

1. Corporation Name

BLUE CHIP SECURITY, INC.



Principal Place of Business

Mailing Address

3097 LAKE WORTH ROAD
LAKE WORTH FL 33461

3097 LAKE WORTH ROAD
LAKE WORTH FL 33461

2. Principal Place of Business

2a. Mailing Address

21 5254 Palm Way
Suite, Apt. #, etc.

26 PO Box 6956
Suite, Apt. #, etc.

22 City & State
23 Lake Worth FL

27 City & State
28 Lake Worth FL

24 Zip 33463 25 Country US

29 Zip 33466 30 Country US

9. Name and Address of Current Registered Agent

KING, RICHARD
3097 LAKE WORTH ROAD
LAKE WORTH FL 33461

3. Date Incorporated or Qualified
08/23/1984

3a. Date of Last Report
04/27/1995

4. FEI Number
59-2549261

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5254 Palm Way

83

84 City

Lake Worth

FL

85 Zip Code

33463

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(If Not Registered Agent, Signature, typed or printed name of authorized officer)

DATE

3-6-96

12. OFFICERS AND DIRECTORS

TITLE P
NAME KING, RICHARD
STREET ADDRESS 5254 PALM WAY
CITY-ST-ZIP LAKE WORTH FL 33463 ☐ DELETE

TITLE V
NAME EDDINS, ROBERT
STREET ADDRESS 6529 EASTVIEW DRIVE
CITY-ST-ZIP LANTANA FL 33462 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard King

3-6-96

407-969-0598

CR2E034 (12/95)