2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 25, 2007
Secretary of State

DOCUMENT# M05000001148

Entity Name: GLOBAL SECURITY PARTNERS, LLC

Current Principal Place of Business:

2328 PACIFIC AVE
FOREST GROVE, OR 97116

New Principal Place of Business:

Current Mailing Address:

PO BOX 219
FOREST GROVE, OR 97116

New Mailing Address:

FEI Number: 56-2439417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	WILBUR, BRIAN	
Address:	2328 PACIFIC AVE	
City-St-Zip:	FOREST GROVE, OR 97116	
Title:	MGRM	( ) Delete
Name:	SMITH, DELFORD	
Address:	3850 THREE MILE LANE	
City-St-Zip:	MCMINNVILLE, OR 97128	
Title:	MGRM	( ) Delete
Name:	MILLER, JOHN	
Address:	PO BOX 230698	
City-St-Zip:	PORTLAND, OR 97281	
Title:	MGRM	( ) Delete
Name:	ZIMMERLY, DENNIS	
Address:	PO BOX 230698	
City-St-Zip:	PORTLAND, OR 97281	
Title:	MGRM	( ) Delete
Name:	KIRKLAND, KRISTEN	
Address:	PO BOX 230698	
City-St-Zip:	PORTLAND, OR 97281	

ADDITIONS/CHANGES:

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
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN D WILBUR MGRM 03/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date