## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000037417

Entity Name: GRYPHON GROUP SECURITY SOLUTIONS, INC.

FILED Mar 19, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4479 N US 1 SUITE A MELBOURNE, FL 32935 **Current Mailing Address: New Mailing Address:** 4479 N US 1 SUITE A MELBOURNE, FL 32935 FEI Number: 27-0007889 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVIS, MARSHALL D 233 E. BAY ST. STE. 620 JACKSONVILLE, FL 32202 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition VADEN, MICHAEL K VADEN, MICHAEL K Name: Name: P. O. BOX 411269 P. O. BOX 411269 Address: Address: City-St-Zip: MELBOURNE, FL 32941 City-St-Zip: MELBOURNE, FL 32941 () Delete Title: VΡ ( ) Change (X) Addition Title: LANDE, PAMELA L Name: Name: 541 SEAPORT TERRACE, N.E. Address: Address: PALM BAY, FL 32909 City-St-Zip: City-St-Zip: Title: () Delete Title: VΡ ( ) Change (X) Addition SKELLY, J. B Name: Name: 3243 KELLY PARK ROAD Address Address: City-St-Zip: City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: VΡ ( ) Change (X) Addition SALAZAR, BRANDON J Name: Name: Address: Address: 190 AURORA ROAD, APT. 162 City-St-Zip: City-St-Zip: MELBOURNE, FL 32935 Title: Title: ( ) Change (X) Addition ( ) Delete AYALA, JUAN P Name: Name: Address: Address: 382 CHERRY HILLS ROAD, N.E. City-St-Zip: City-St-Zip: PALM BAY, FL 32905

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: PAMELA L. LANDE VP 03/19/2005