

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085880

FILED
Mar 28, 2005
Secretary of State

Entity Name: APEX SECURITY AND CONVENTION SERVICES, INC.

Current Principal Place of Business:

600 NORTH THACKER AVE.
STE. B9
KISSIMMEE, FL 34741

New Principal Place of Business:

3700 COMMERCE BLVD.
KISSIMMEE, FL 34741

Current Mailing Address:

600 NORTH THACKER AVE.
STE. B9
KISSIMMEE, FL 34741

New Mailing Address:

3700 COMMERCE BLVD.
KISSIMMEE, FL 34741

FEI Number: 13-4206920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MURPHY, JOHN J
3477 HAWKIN DRIVE
KISSIMMEE, FL 34746 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: P () Delete
Name: MURPHY, JOHN J
Address: 3477 HAWKIN DRIVE
City-St-Zip: KISSIMMEE, FL 34746

Title: P () Delete
Name: MURPHY, JILL
Address: 3477 HAWKIN DR.
City-St-Zip: KISSIMMEE, FL 34746

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: JILL MURPHY

P

03/28/2005

Electronic Signature of Signing Officer or Director

Date