

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065672

FILED
Feb 26, 2009
Secretary of State

Entity Name: LONE WOLF INVESTIGATION AND SECURITY SERVICES, INC.

Current Principal Place of Business:

6907 E HWY 22
PANAMA CITY, FL 32404

New Principal Place of Business:

2917 WAKULLA AVE
PANAMA CITY, FL 32404

Current Mailing Address:

PO BOX 6525
PANAMA CITY, FL 32404

New Mailing Address:

2917 WAKULLA AVE
PANAMA CITY, FL 32404

FEI Number: 83-0362639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, CLINT W JR
2114 ST. ANDREWS BLVD.
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

BRANNON, IGNATIUS D
2917 WAKULLA AVE
PANAMA CITY, FL 32404 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: IGNATIUS D BRANNON

02/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: HALL, CLINT W JR
Address: 2114 ST. ANDREWS BLVD.
City-St-Zip: PANAMA CITY, FL 32405

Title: VPD () Delete
Name: BRANNON, IGNATIUS
Address: 2917 WAKULLA AVE
City-St-Zip: PANAMA CITY, FL 32404

Title: SD () Delete
Name: BRANNON, IGNATIUS
Address: 2917 WAKULLA AVE
City-St-Zip: PANAMA CITY, FL 32404

Title: TR () Delete
Name: HALL, CLINT W JR
Address: 2114 ST. ANDREWS BLVD.
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BRANNON, IGNATIUS D
Address: 2917 WAKULLA AVE
City-St-Zip: PANAMA CITY, FL 32404

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: BRANNON, IGNATIUS D
Address: 2917 WAKULLA AVE
City-St-Zip: PANAMA CITY, FL 32404

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: IGNATIUS D BRANNON

OFF

02/26/2009

Electronic Signature of Signing Officer or Director

Date