

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152362

Entity Name: FORELINE SECURITY, INC.

FILED
May 02, 2005
Secretary of State

Current Principal Place of Business:

8419 SUNSTATE STREET
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

8419 SUNSTATE STREET
TAMPA, FL 33634

New Mailing Address:

FEI Number: 20-0502573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
C/O HUNTER J. BROWNLEE
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

ANDERSON, DAVID T
200 1ST AVENUE
UNIT 311
ST. PETERSBURG, FL 33706 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: DAVID T. ANDERSON

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO () Change (X) Addition
Name: ANDERSON, DAVID T
Address: 200 1ST AVENUE, UNIT 311
City-St-Zip: ST. PETERSBURG, FL 33706 US

Title: T () Change (X) Addition
Name: LAPLANTE, YVONNE J
Address: 3029 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33594 US

Title: SSVP () Change (X) Addition
Name: LAPLANTE, RICHARD L
Address: 3029 WISTER CIRCLE
City-St-Zip: VALRICO, FL 33594 US

Title: CIO () Change (X) Addition
Name: BLAIS, MARK
Address: 3255 STONEBRIDGE TRAIL
City-St-Zip: VALRICO, FL 33594 US

Title: CFO () Change (X) Addition
Name: NAIL, DAVID A
Address: 4010 VALRICO GROVE DRIVE
City-St-Zip: VALRICO, FL 33594 US

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: DAVID A. NAIL

CFO

05/02/2005

Electronic Signature of Signing Officer or Director

Date