

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000156494

FILED
Oct 21, 2005
Secretary of State

Entity Name: CHARTER EXECUTIVE SECURITY @ ASSOCIATES INC

Current Principal Place of Business:

PO BOX 49211
LEESBURG, FL 34749

New Principal Place of Business:

1999 W. COLONIAL
ORLANDO, FL 32387

Current Mailing Address:

PO BOX 49211
LEESBURG, FL 34749

New Mailing Address:

PO BOX 772428
ORLANDO, FL 32387

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRAHAM, JAMES L
16940 WOODCREST WAY
CLERMONT, FL 34714 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: JAMES L. GRAHAM

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: P () Delete
Name: GRAHAM, JAMES L
Address: 16940 WOODCREST WAY
City-St-Zip: CLERMONT, FL 34714

Title: VP () Delete
Name: GRAHAM, JAMES L
Address: 16940 WOODCREST WAY
City-St-Zip: CLERMONT, FL 34714

Title: SEC () Delete
Name: GRAHAM, JAMES L
Address: 16940 WOODCREST WAY
City-St-Zip: CLERMONT, FL 34714

Title: TREA () Delete
Name: GRAHAM, JAMES L
Address: 16940 WOODCREST WAY
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMES L. GRAHAM

Electronic Signature of Signing Officer or Director

PRES

10/21/2005

Date