

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000006611

FILED
May 05, 2009
Secretary of State**Entity Name:** GUARDIAN ANGELS SECURITY SERVICES INC.**Current Principal Place of Business:**3277 LAKE WORTH ROAD
SUITE E
PALM SPRINGS, FL 33461 US**New Principal Place of Business:****Current Mailing Address:**3277 LAKE WORTH ROAD
SUITE E
PALM SPRINGS, FL 33461 US**New Mailing Address:****FEI Number:** 20-2132834**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CUMMINGS, DAVID E JR
4058 FOSS ROAD
LAKE WORTH, FL FL 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CUMMINGS, DAVID E JR
Address: 4058 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VP () Delete
Name: BEALE, WILLIAM P
Address: 9090 FOUNTAIN ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Delete
Name: CUMMINGS, SUSAN M
Address: 4058 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461

Title: D (X) Delete
Name: BEALE, NANCY E
Address: 9090 FOUNTAIN ROAD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRAVES, ROBERT
Address: 3277 LAKE WORTH ROAD
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: D (X) Change () Addition
Name: BEALE, WILLIAM P
Address: 9090 FOUNTAIN ROAD
City-St-Zip: LAKE WORTH, FL 33467

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 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: ROBERT GRAVES

P

05/05/2009

Electronic Signature of Signing Officer or Director

Date