

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000008781

FILED  
Oct 21, 2009  
Secretary of State

Entity Name: FREEMAN SECURITY SERVICES INC.

## Current Principal Place of Business:

605 JONES AVENUE  
SUITE #5  
HAINES CITY, FL 33844

## New Principal Place of Business:

519B JONES AVENUE  
SUITE #3  
HAINES CITY, FL 33844

## Current Mailing Address:

605 JONES AVENUE  
SUITE #5  
HAINES CITY, FL 33844

## New Mailing Address:

519B JONES AVENUE  
SUITE #3  
HAINES CITY, FL 33844

FEI Number: 26-1754960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FREEMAN, AREEN M  
939 DELANO COURT  
KISSIMMEE, FL 34758 US

## Name and Address of New Registered Agent:

FREEMAN, ARLEEN M  
939 DELANO COURT  
KISSIMMEE, FL 34758 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: ARLEEN FREEMAN

10/21/2009

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: CEOP ( ) Delete  
Name: FREEMAN, DARREN W  
Address: 709 COUNTRY WALK COVE  
City-St-Zip: EAGLE LAKE, FL 33839

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DARREN W. FREEMAN

CEOP

10/21/2009

Electronic Signature of Signing Officer or Director

Date