

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08640

Entity Name: SECURITY FORCES, INC.

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

P.O. 36607
CHARLOTTE, NC 282366607

New Principal Place of Business:

Current Mailing Address:

P.O. 36607
CHARLOTTE, NC 282366607

New Mailing Address:

FEI Number: 56-0515447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: POUNDS, STEVEN C
Address: 1506 SPRING POINT RD.
City-St-Zip: ROCK HILL, SC 29732

Title: SD () Delete
Name: CLARK, DONALD W
Address: 3932 LAKESHORE RD S
City-St-Zip: DENVER, NC

Title: VDT () Delete
Name: WATSON, ROBERT C
Address: 1020 EUCLID AVE
City-St-Zip: CHARLOTTE, NC 28203

Title: PCOB () Delete
Name: O'BRIEN, LAWRENCE J JR
Address: 1042 BOLLING RD
City-St-Zip: CHARLOTTE, NC 28207

Title: VPCA () Delete
Name: O'BRIEN, HEATHER
Address: 5410 COLONY RD
City-St-Zip: CHARLOTTE, NC 28226

Title: VPO () Delete
Name: ALMY, STEPHEN J
Address: 828 FOXFIRE CT
City-St-Zip: LAWRENCEVILLE, GA 30044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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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 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: STEVEN C POUNDS

VP

01/11/2007

Electronic Signature of Signing Officer or Director

_____ Date