


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90124 020 ***150.00

DOCUMENT # P12560

1. Entity Name
VICON INDUSTRIES, INC.



Principal Place of Business Mailing Address
89 ARKAY DR **89 ARKAY DR**
HAUPPAGE, NY 11788 US **HAUPPAGE, NY 11788 US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

40005331



01132006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
11-2160665 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FIDRE, FRANK 500 EAST BROWARD BLVD., STE 124 FORT LAUDERDALE, FL 33394	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	State Zip Code FL _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HORN, PETER 89 ARKAY DR HAUPPAGE, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BADKE, JOHN 89 ARKAY DR HAUPPAGE, NY 11788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCGOWAN, BRET 89 ARKAY DR HAUPPAGE, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTSON, GREGORY W 89 ARKAY DR HAUPPAGE, NY 11788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROCHE, ARTHUR D 89 ARKAY DRIVE HAUPPAGE, NY 11788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John M. Badke **JOHN M. BADKE** **1-16-06** **631-952-2289**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40005331

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VICON INDUSTRIES, INC.

11. ADDITIONS TO OFFICERS AND DIRECTORS IN 10

1.1 TITLE	P/D
1.2 NAME	KENNETH DARBY
1.3 STREET ADDRESS	89 ARKAY DRIVE
1.4 CITY-ST-ZIP	HAUPPAUGE, NY 11788
2.1 TITLE	VP
2.2 NAME	THOMAS FINSTEIN
2.3 STREET ADDRESS	89 ARKAY DRIVE
2.4 CITY-ST-ZIP	HAUPPAUGE, NY 11788
3.1 TITLE	VP
3.2 NAME	YACOV PSHTISSKY
3.3 STREET ADDRESS	89 ARKAY DRIVE
3.4 CITY-ST-ZIP	HAUPPAUGE, NY 11788
4.1 TITLE	D
4.2 NAME	CLIFTON H.W. MALONEY
4.3 STREET ADDRESS	89 ARKAY DRIVE
4.4 CITY-ST-ZIP	HAUPPAUGE, NY 11788
5.1 TITLE	D
5.2 NAME	PETER NEUMANN
5.3 STREET ADDRESS	89 ARKAY DRIVE
5.4 CITY-ST-ZIP	HAUPPAUGE, NY 11788