## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

AMERICAN PROTECTIVE SERVICES, INC.										
Principal Place of Business Mailing Address										
7770 PARDEE OAKLAND GA		7770 PARDEE LANE OAKLAND CA 94621				DO NOT WRITE IN THIS SPACE				
				3. Date Incorporated or Qualified 05/26/1987						
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For				
21		26				<b>94-1366324</b> Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required				
City & State	3	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip 24	Country 25	Zτρ <b>29</b>	30 Co	untry	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
	g. Name and Address of Cu	rrent Registered Agent	L		10. Name and Address of New Registered Agent					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81 82 83	Name Street Addr	ress (P.O. Box Number is Not Acceptable)				
				84	City	85 Zip Code				

11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, Leg damiliar with and accept the objection 607 0505. Florida Statutes

•	Triadrillar with, and accept the congations of	.,					
SIGNATURE	Signature, typed or printed name of registered agory and title	e if applicable (NO)	E Registered Agent signature requi	ired when reinstating)	DATÉ		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES	CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CSD	☐ DELETE	1.1 TITLE		☐ Change	Addition	
NAME	KEATING, THOMAS W.		1.2 NAME				
STREET ADDRESS	7770 PARDEE LANE		1.3 STREET ADDRESS				
CITY-ST-ZIP	OAKLAND CA		1.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change	Addition	
NAME	PLOMGREN, RONALD A		2.2 NAME				
STREET ADDRESS	7770 PARDEE LANE		2.3 STREET ADDRESS				
CITY-ST-ZIP	OAKLAND CA		2.4 CITY-ST-ZIP				
TITLE	PD	DELETE	3 1 TITLE		☐ Change	Addition	
NAME	PEDERSEN, DWIGHT 8.		3.2 NAME				
STREET ADDRESS	7770 PARDEE LANE		3.3 STREET ADDRESS				
CITY-ST-ZIP	OAKLAND CA		3.4. CITY-ST-ZIP				
TITLE	V	☐ DELETE	4.1 TITLE		☐ Change	Addition	
NAME	CRAMER, RODGER E.		4. 2 NAME				
STREET ADDRESS	7770 PARDEE LANE		4.3 STREET ADDRESS				
CHTY-ST-ZIP	OAKLAND CA		4.4 CITY - ST- ZIP				
TITLE	V	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME	SUTAK, THOMAS A.		5.2 NAME				
STREET ADDRESS	7770 PARDEE LANE		5 3 STREET ADDRESS				
CITY-ST-ZIP	OAKLAND CA		5.4 CITY-ST-ZIP			_	
TITLE	VI	DELETE	6.1 TITLE		Change	Addition	
NAME	RICKSEN, LAURENCE C		6.2 NAME				
STREET ADDRESS	7770 PARDEE LANE		6.3 STREET ADDRESS				
City.St. 7ip	OAKLAND CA		SACITY, ST., 7ID				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and occurate 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Laurence

510-283-1179

**FILED** 

Apr 15 1998 8:00am

Secretary of State