

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000078148 (1)

1. Corporation Name

SHAMROCK SECURITY SERVICES, INC.



Principal Place of Business

Mailing Address

12606 N NEBRASKA AVE.  
TAMPA FL 33612

12606 N NEBRASKA AVE.  
TAMPA FL 33612

2. Principal Place of Business

21 3615 W. Waters

Suite, Apt. #, etc.

22 Suite 108

City & State

23 Tampa, FL

Zip

24 33614-2783

Country

25 USA

26. Mailing Address

26 3615 W. Waters

Suite, Apt. #, etc.

27 Suite 108

City & State

28 Tampa, FL

Zip

29 33614-2783

Country

30 USA

3. Date Incorporated or Qualified

10/24/1994

3a. Date of Last Report

04/28/1995

4. FEI Number

59-3266557

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SMITH, SMITTY  
3802 EHRLICH RD #210  
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name C T Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road

83

84 City Plantation

FL

85 Zip Code 33324

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 board of directors of the corporation, and I, the undersigned, being a duly authorized officer or director of the corporation, do hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME KELLY, JOHN J. CRR  
STREET ADDRESS 12606 N. NEBRASKA AVE.  
CITY - ST - ZIP TAMPA FL

TITLE T ☒ DELETE

NAME KELLY, JOHN R J  
STREET ADDRESS 12606 N. NEBRASKA AVE  
CITY - ST - ZIP TAMPA FL 33612

TITLE VP ☒ DELETE

NAME DUQUO, PETER  
STREET ADDRESS 2525 W. BRADDOCK STREET  
CITY - ST - ZIP TAMPA FL 33607

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME P/S/T

1.3 STREET ADDRESS Gus Dixon  
1422 W. Peachtree St. Suite 820

1.4 CITY - ST - ZIP Atlanta, GA 30309 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

200001811022

05/07/96-01075-000 0/3

\*\*\*200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report, or supplemental annual 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 or 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:

Gus Dixon, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-26-96 404-607-7001

Daytime Phone #

CR2E034 (12/95)