

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P9600001244
1. Corporation Name
Guardsmen Security Corp.

Principal Place of Business Mailing Address
7071 W. Commercial Blvd
Suite 2-A
Tamarac, FL 33319

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 12794 W. Forest Hill Blvd Suite, Apt. #, etc. 22 Suite 28-B City & State 23 W.P.B., Florida Zip 24 33414 Country 25 US	2a. Mailing Address 26 12794 W. Forest Hill Blvd Suite, Apt. #, etc. 27 Suite 28-B City & State 28 W.P.B., Florida Zip 29 33414 Country 30 US
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3. Date Incorporated or Qualified 2/2/96	4. FEI Number 65-0359615	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent

Wilkinson, Kevin D.
12794 W. Forest Hill Blvd.
Suite 28B
W.P.B., FL 33414

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Type or print name of registered agent and the applicable

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chairman, President ☐ DELETE	11 TITLE	☒ Change ☐ Addition
NAME	Richard K Gallione	12 NAME	
STREET ADDRESS	7071 W. Commercial Blvd	13 STREET ADDRESS	12794 W. Forest Hill Blvd #28B
CITY-ST-ZIP	Tamarac, FL 33319	14 CITY-ST-ZIP	W.P.B., FL 33414
TITLE	Vice President ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	Kevin D. Wilkinson	22 NAME	
STREET ADDRESS	12794 W. Forest Hill Blvd #28B	23 STREET ADDRESS	
CITY-ST-ZIP	W.P.B., FL 33414	24 CITY-ST-ZIP	
TITLE	Treasurer/Secretary ☐ DELETE	31 TITLE	☒ Change ☐ Addition
NAME	Richard K Gallione	32 NAME	
STREET ADDRESS	7071 W. Commercial Blvd	33 STREET ADDRESS	12794 W. Forest Hill Blvd #28B
CITY-ST-ZIP	Tamarac, FL 33319	34 CITY-ST-ZIP	W.P.B., FL 33414
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 simplified 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 registered or trustee, named on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13. I exchanged all or an instrument with any of the following:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/98 954-796-1500

CR2E034 (10/97)