

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083735

Entity Name: FIRST COAST SECURITY, INC.

FILED  
Apr 12, 2007  
Secretary of State

## Current Principal Place of Business:

316 BOATING CLUB RD  
ST. AUGUSTINE, FL 32084

## New Principal Place of Business:

## Current Mailing Address:

316 BOATING CLUB RD  
ST. AUGUSTINE, FL 32084

## New Mailing Address:

FEI Number: 59-3472387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALL, CHARLES E JR.  
77 ALMERIA STREET  
ST. AUGUSTINE, FL 32084 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: PSTD ( ) Delete  
Name: CROYLE, GARY E  
Address: 316 BOATING CLUB RD  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: VP ( ) Delete  
Name: CISKY, JON F  
Address: 205 VIKING STREET  
City-St-Zip: PALATKA, FL 32177

Title: VP (X) Delete  
Name: MOELLER, WALTER  
Address: 3020 3RD STREET  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP (X) Delete  
Name: ZEAGLER, GEORGE  
Address: 8186 BOONESBOROUGH TRAIL  
City-St-Zip: JACKSONVILLE, FL 32244

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition  
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: GARY CROYLE

PSDT

04/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date