

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000021316

Entity Name: GBR SECURITY SERVICES, INC.

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

11655 CENTRAL PARKWAY
SUITE 314
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 54436
JACKSONVILLE, FL 322454436 US

New Mailing Address:

FEI Number: 59-3497120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YAIGI, TONIA
3123 BEACH BLVD.
JACKSONVILLE, FL 32207 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: DP () Delete
Name: ROUSE, GARY B
Address: PO BOX 54436
City-St-Zip: JACKSONVILLE, FL 32245

Title: VPST () Delete
Name: ROUSE, LISA R
Address: PO BOX 54436
City-St-Zip: JACKSONVILLE, FL 32245

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ROUSE, GARY B
Address: PO BOX 54436
City-St-Zip: JACKSONVILLE, FL 32245

Title: DPST (X) Change () Addition
Name: ROUSE, LISA R
Address: PO BOX 54436
City-St-Zip: JACKSONVILLE, FL 32245

I hereby certify that the information supplied with this filing does not qualify 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: LISA R. ROUSE

DPST

03/25/2008

Electronic Signature of Signing Officer or Director

Date