

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001567

Entity Name: STANLEY SECURITY SOLUTIONS, INC.**Current Principal Place of Business:**8350 SUNLIGHT DRIVE
FISHERS, IN 46037**Current Mailing Address:**8350 SUNLIGHT DRIVE
FISHERS, IN 46037 US**FEI Number:** 35-1842918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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:** JILL CILMI

01/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MCCORMACK, JOSEPH
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR, VICE PRESIDENT,
 TREASURER
Name BARTONE, MICHAEL A.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title CHAIRMAN, SECRETARY
Name PARTRIDGE SHERER, KATHRYN
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR, CHIEF EXECUTIVE
 OFFICER
Name RAFF, ROBERT H. JR.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR, VICE PRESIDENT
Name VAGNINI, MICHAEL DAVID
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR OF REGULATORY
 COMPLIANCE AND LICENSING
Name MAPLES, KAREN
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL A. BARTONE

VICE PRESIDENT

01/30/2019

Electronic Signature of Signing Officer/Director Detail

Date