

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001567

Entity Name: STANLEY SECURITY SOLUTIONS, INC.**Current Principal Place of Business:**75 PORTSMOUTH BLVD
SUITE 220
PORTSMOUTH, NH 09801**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:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR. SUITE A
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP OF CORPORATE TAX, DIRECTOR
Name	RAFF, ROBERT H.	Name	BARTONE, MICHAEL
Address	75 PORTSMOUTH BLVD SUITE 220	Address	75 PORTSMOUTH BLVD SUITE 220
City-State-Zip:	PORTSMOUTH NH 03801	City-State-Zip:	PORTSMOUTH NH 03801
Title	DIRECTOR, VICE PRESIDENT	Title	DIRECTOR OF REGULATORY COMPLIANCE AND LICENSING
Name	VAGNINI, MICHAEL	Name	MAPLES, KAREN
Address	75 PORTSMOUTH BLVD SUITE 220	Address	75 PORTSMOUTH BLVD SUITE 220
City-State-Zip:	PORTSMOUTH NH 03801	City-State-Zip:	PORTSMOUTH NH 03801
Title	ASST. SECRETARY	Title	SECRETARY, CHAIRMAN
Name	AYALA, ADAN	Name	BLUM, MICHAEL
Address	75 PORTSMOUTH BLVD SUITE 220	Address	75 PORTSMOUTH BLVD SUITE 220
City-State-Zip:	PORTSMOUTH NH 03801	City-State-Zip:	PORTSMOUTH NH 03801
Title	CEO, VP	Title	TREASURER
Name	DURUSSEL, RYAN	Name	PATERNOSTRO, ROBERT
Address	75 PORTSMOUTH BLVD SUITE 220	Address	75 PORTSMOUTH BLVD SUITE 220
City-State-Zip:	PORTSMOUTH NH 03801	City-State-Zip:	PORTSMOUTH NH 03801

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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: ROBERT H. RAFF**PRESIDENT****04/22/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR OF OPERATIONS
Name VISTA, ROMEO
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name DAYON, TROY
Address 75 PORTSMOUTH BLVD, SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name MASCOLA, STEPHEN
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name MORRIS, THEODORE
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name BORECKI, GREG
Address 75 PORTSMOUTH BLVD, SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name DENTLER, DOUG
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name MILLER, JOSH
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801

Title ASST. SECRETARY
Name RICCITELLI, DONALD
Address 75 PORTSMOUTH BLVD
SUITE 220
City-State-Zip: PORTSMOUTH NH 03801