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WEB FORM COPY

STATE OF ARIZONA CORPORATION COMMISSION CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE





DUE ON OR BEFORE 5/17/2015

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PLEASE READ ALL INSTRUCTIONS. The following information is required by A.R.S. §§10-1622 & 10-11622 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §§ 10-121(A) & 10-3121(A). YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections where necessary. Information for the report should reflect the current status of the corporation.

F01001621

RECEIVED

SENTINEL SECURITY PLANS, INC. 2338 W ROYAL PALM RD STE-J

MAR 1 6 2016

PHOENIX, AZ	85021	ARIZONA CORP. COMMISSION CORPORATIONS DIVISION			
Business Phone:		(Business phone is optional.)			
State of Domicil	e: VIRGINIA	Type of Corporation: PROFIT			
Mailing Address	:: PRENTICE-HALL COR : 2338 W ROYAL PALM RD ST : PHOENIX, AZ 85021				
	1				
ACC USE ONLY	If appointing a ne	ew statutory agent, the new agent MUST consent to that			
Fee \$		signing below. Note that the agent address must be in Arizona.			
Penalty \$	I, (individual) or We, (corporation or limited liability company) having been designated the new Statutory Agent.				
Reinstate \$	do hereby consent to this appointment until my removal or resignation pursuant to law.				
Expedite \$ Sig		nature of new Statutory Agent			
Resubmit \$					
] Pri	inted Name of new Statutory Agent			
Secondary Addres (Foreign Corporations are to complete this sec	REQUIRED 1929 ALLEN I HOUSTON IX				
Check the one catego	ry below which best descrif	bes the CHARACTER OF BUSINESS of your corporation.			
BUSINESS CORPORA ☐ 1. Accounting	<u>TIONS</u>	NON-PROFIT CORPORATIONS 1. □ Charitable			
2. Advertising 3. Aerospace	☐ 21. Mining ☐ 22. News Media	2. 🗖 Benevolent			
4. Agriculture	23. Pharmaceutical	3. ☐ Educational 4. ☐ Civic			
☐ 5. Architecture ☐ 6. Banking/Finance	☐ 24. Publishing/Printing ☐ 25. Ranching/Livestock	5. ⊑ Political 6. ⊑ Religious			
☐ 7. Barbers/Cosmetolog☐ 8. Construction	y <u>□</u> 26. Real Estate □ 27. Restaurant/Bar	7. Social 8. Literary			
9. Contractor	🖂 28. Retail Sales	9. 🔲 Cultural			
□ 10. Credit/Collection □ 11. Education	30. Sports/Sporting Events	10. ☐ Athletic 11. ☐ Science/Research			
12. Engineering13. Entertainment	☐ 31. Technology(Computers) ☐ 32. Technology(General)	12. ☐ Hospital/Health Care 13. ☐ Agricultural			
14. General Consulting	☐ 33. Television/Radio	14. Cooperative Marketing Association			
☐ 16. Hotel/Motel	34. Tourism/Convention Serv35. Transportation	16. Homeowner's Association			
17. Import/Export	☐ 36. Utilities	17. Professional, commercial			

37. Veterinary Medicine/Animal Care

38. Other PROFIT

☐ 18. Insurance

☐ 19. Legal Services

industrial or trade association

18. 5 Other_

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(For-profit Corporations and Business Trusts are REQUIRED to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate. PLEASE PRINT OR TYPE CLEARLY.

5a. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized. Number of Shares/Certificates Authorized Class Series Within Class (if any) 5b. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of shares issued. Number of Shares/Certificates Issued Class Series Within Class (if any) (For-profit Corporations and Business Trusts are REQUIRED to complete this section.) 6. SHAREHOLDERS: List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation. Name: SENTINEL SECURITY PLANS INC Name: NONE | Name: 7. OFFICERS PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE. MICHAEL G TRIESCH Name: Name: JANETS KEY Title: - OTHER OFFICER OTHER OFFICER Title: Address: 1929 ALLEN PARKWAY Address: 1929 ALLEN PARKWAY HOUSTON, TX 77019 HOUSTON, TX 77019 Date taking office: 05/19/2010 Date taking office: 05/19/2005 GERRY D HEARD Name: Name: **PRESIDENT** Title: Title: Address: 1929 ALLEN PARKWAY Address: HOUSTON, TX 77019 Date taking office: 04/22/2005 Date taking office: 8. DIRECTORS PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE. MICHAEL G TRIESCH KEVIN F DOHERTY Name: Name: Address: 1929 ALLEN PARKWAY Address: 1929 ALLEN PARKWAY HOUSTON, TX 77019 HOUSTON, TX 77019 Date taking office: 05/19/2010 Date taking office: 04/22/2005 GERRY D HEARD Name: Name: Address: 1929 ALLEN PARKWAY Address: ________ HOUSTON, TX 77019 Date taking office: 05/09/1995 Date taking office:

AR:0046 Rev. 02/2016

Please Enter Corporation Name: SENTINEL SECURITY PLANS, INC. File number F01001621 Page 3						
9. <u>FINANCIAL DISCLOSURE</u> (A.R.S. §10-11622(A)(9)) Nonprofits – financial disclosure is no longer required. Cooperative marketing associations – must submit a financial statement. All other types of corporations are not required to file a financial statement.						
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ONI	Y NONDROELT CORROBATIONS MUST ANSWER THE					
9A.	LY NONPROFIT CORPORATIONS MUST ANSWER THIS QUESTION MEMBERS (A.R.S. §10-11622(A)(6))		ration BOES TI BOES NOT THE			
		orpora	ration DOES DOES NOT Mave members.			
Α.	O. CERTIFICATE OF DISCLOSURE (A.R.S. §§ 10-202(D), 10-3202(D), 10-1622(A)(8) & 10-11622(A)(7)) Has any person who is currently an officer, director, trustee, incorporator, or who, in a For-profit corporation, controls or holds more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been:					
1.	Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate?					
2.	Convicted of a felony, the essential elements of which consisted of tre	ud, misr	representation, theft by false pretenses or restraint of trade or			
3.	The sevential manager of the sevent with the sevent belief in the sevential available of this assistance of the sevential and the seventia					
	If "VES" to A the following information was the	<u>One</u>	e box must be marked: YES 🔲 NO 🔯			
	If "YES" to A, the following information <u>must be submitted</u> as an actions stated in Items 1 through 3 above.	attachme	nent to this report for each person subject to one or more of the			
	1. Full birth name.	5 .	Date and location of birth.			
	 Full present name and prior names used. Present home address. 	6.	The nature and description of each conviction or judicial			
	 All prior addresses for immediately preceding 7 year period. 		action; the date and location; the court and public agency involved; and the file or cause number of the case.			
B. Has any person who is currently an officer, director, trustee, incorporator, or who, in a For-profit corporation, controls or holds over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a 20% interest in any other corporation on the bankruptcy or receivership of that other corporation? One box must be marked: YES I NO statement above. (a) Name and address of each corporation and the persons involved. (b) State(s) in which it: (i) was incorporated and (ii) transacted business. (c) Dates of corporate operation.						
11. <u>s</u>	TATEMENT OF BANKRUPTCY OR RECEIVERSHIP (A.R.S. §§ 10-	1623 & ·	: 10-11623)			
A. Has the <u>corporation</u> filed a petition for bankruptcy or appointed a receiver? <u>One box must be marked:</u> YES INO IN If "Yes" to A, the following Information <u>must be submitted</u> as an attachment to this report: 1. All officers, directors, trustees and major stockholders of the corporation within one year of filing the petition for bankruptcy or the appointment of a receiver. If a major stockholder is a corporation, the statement shall list the current president, chairman of the board of directors and major stockholders of such corporate stockholder. "Major stockholder" means a shareholder possessing or controlling twenty per cent of the issued and outstanding shares or twenty per cent of any proprietary, beneficial or membership interest in the corporation.						
	2. Whether any such person has been an officer, director, trustee of	r maior s	stockholder of any other corporation within one year of the			
bankitapites of receivership of the other corporation. If so, for each such corporation give:						
(a) Name and address of each corporation;						
	(b) States in which it: (i) was incorporated and (ii) transaction.	cted bus	siness.			
12. <u>S</u>	IGNATURES: Annual Reports must be signed and dated by a	t least o	one duly authorized officer or they will be rejected.			
12. <u>SIGNATURES:</u> Annual Reports must be signed and dated by at least one duly authorized officer or they will be rejected. Idectare, under penalty of perjury, that all corporate income tax returns required by Title 43 of the Arizona Revised Statutes have been filed with the Arizona Department of Revenue. I further declare under penalty of perjury that I (we) have examined this report and the certificate, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.						
NameDateDateDateDate						
Signature Signature						
Title TREASURER Title						
AE3-004	(Signator(s) must be duly authorized corporate of	ficer(s)) listed in section 7 of this report.)			