

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213513759

1.) CORPORATION NAME:

Center for Public Safety Excellence, Inc.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RANDOLPH D FROSTICK
9200 CHURCH ST STE 400
MANASSAS, VA 20110**

SCC ID NO: **05567250**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

MANASSAS CITY (FILED IN PRINCE WILLIAM COUNTY)

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4501 SINGER COURT SUITE 180

CITY/ST/ZIP: CHANTILLY, VA 20151

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	RANDY R BRUEGMAN				
TITLE:	PRESIDENT				
ADDRESS:	ANAHEIM FIRE DEPT 201 S ANAHEIM STE 300 ANAHEIM, CA 92805				
CITY/ST/ZIP/CO:					

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	MAX H BAKER				
TITLE:	VICE PRESIDENT				
ADDRESS:	1525 N MAIN ST #153 BOUNTIFUL, UT 84010				
CITY/ST/ZIP/CO:					

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	MIKE WORTHINGTON				
TITLE:	S/T				
ADDRESS:	1302 FOX GLEN DRIVE ST CHARLES, IL 60174				
CITY/ST/ZIP/CO:					

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	KEVIN MILLER				
TITLE:	DIRECTOR				
ADDRESS:	1415 ELLIOTT PLACE NW WASHINGTON, DC 20007				
CITY/ST/ZIP/CO:					

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	LORI MOORE-MERRELL				
TITLE:	DIRECTOR				
ADDRESS:	INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS 1750 NEW YORK AVE NW WASHINGTON, DC 20006				
CITY/ST/ZIP/CO:					

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JEFF PIECHURA				
TITLE:	DIRECTOR				
ADDRESS:	NORTHWEST FIRE DISTRICT 5225 W MASSINGALE ROAD TUCSON, AZ 85743				
CITY/ST/ZIP/CO:					

NAME:	WAYNE SENTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SOUTH KITSAP FIRE RESCUE		
	1974 FIRCREST DRIVE SE		
CITY/ST/ZIP/CO:	PORT ORCHARD, WA 98367		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ RANDY R BRUEGMAN</u>	<u>RANDY R BRUEGMAN,</u>	<u>3/19/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.