

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841453

FILED
Jan 04, 2011
Secretary of State

Entity Name: ROSSER INTERNATIONAL, INC.

Current Principal Place of Business:

524 WEST PEACHTREE ST., N.W.
ATLANTA, GA 30308

New Principal Place of Business:

Current Mailing Address:

524 WEST PEACHTREE ST., N.W.
ATLANTA, GA 30308

New Mailing Address:

FEI Number: 58-0907845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

OFFICERS AND DIRECTORS:

Title: D
Name: KRENSON, FREDERICK
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

Title: D
Name: PYLANT, JOHN
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

Title: D
Name: GOLSON, JR., WILLIAM
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

Title: C
Name: GRIFFIN, WILLIAM S
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

Title: D
Name: GAINES, DALE A
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

Title: D
Name: HOLLAND, JOY
Address: 524 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30308

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: WILLIAM S. GRIFFIN

CEO

01/04/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date