2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# F01000005410

Entity Name: OLDCASTLE RETAIL, INC.

Current Principal Place of Business:

8201 ARROWRIDGE BLVD.
CHARLOTTE, NC 28273 US

New Principal Place of Business:

375 NORTHRIDGE ROAD
SUITE 350
ATLANTA, GA 30350 US

Current Mailing Address:

375 NORTHRIDGE ROAD
SUITE 350
ATLANTA, GA 30350 US

New Mailing Address:

FEI Number: 58-2652780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D/P ( ) Delete
Name: DEAN, JEFF
Address: 9009 CORPORATE LAKE DR., SUITE 165
City-St-Zip: TAMPA, FL 33685

Title: EVP ( ) Delete
Name: MASKE, J. DAVID
Address: 8201 ARROWRIDGE BLVD.
City-St-Zip: CHARLOTTE, NC 28273

Title: D/AS ( ) Delete
Name: O'DRISCOLL, MICHAEL G
Address: 375 NORTHRIDGE RD. SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: SEC ( ) Delete
Name: ELLIOTT, KELLY A
Address: 375 NORTHRIDGE RD. SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: AS ( ) Delete
Name: HICKMAN, GARY P
Address: 375 NORTHRIDGE RD. SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: D ( ) Delete
Name: BLACK, DOUGLAS
Address: 375 NORTHRIDGE RD. SUITE 350
City-St-Zip: ATLANTA, GA 30350

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition
Name: KEITH, HAAS
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: T (X) Change ( ) Addition
Name: LEHANE, EOIN
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY P. HICKMAN AS 05/01/2006

Electronic Signature of Signing Officer or Director Date