

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004524

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: FLORIDA BLUE CAPITAL INVESTMENTS, INC.

**Current Principal Place of Business:**

400 INTERSTATE NORTH PARKWAY  
PLATINUM TOWER, SUITE 500  
ATLANTA, GA 30339 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 INTERSTATE NORTH PARKWAY  
PLATINUM TOWER, SUITE 500  
ATLANTA, GA 30339 US

**New Mailing Address:**

FEI Number: 13-3908041      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEELHEIM, REINER  
Address: 400 INTERSTATE NORTH PARKWAY, SUITE 500  
City-St-Zip: ATLANTA, GA 30339 US

Title: V ( ) Delete  
Name: ROGER, LINDA  
Address: 400 INTERSTATE NORTH PARKWAY, SUITE 500  
City-St-Zip: ATLANTA, GA 30339 US

Title: SD ( ) Delete  
Name: DOMBROWSKI, ACHIM  
Address: 400 INTERSTATE NORTH PARKWAY, SUITE 500  
City-St-Zip: ATLANTA, GA 30339 US

Title: AS ( ) Delete  
Name: CUMMINGS JR, F G  
Address: 414 UNION STREET, STE 1600  
City-St-Zip: NASHVILLE, TN 37219

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: LINDA ROGER

VP

01/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date