2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34515

Entity Name: O'BRIEN/ATKINS ASSOCIATES, P.A.

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	AMI BOULEVA		New Fillicipal Fla	te of Busiliess.	
Current Ma	ailing Address	s:	New Mailing Addr	New Mailing Address:	
P.O. BOX 12037 RESEARCH TRIANGLE PARK, NC 27709					
FEI Number:	56-1215013	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US					
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:					
	Electroni	c Signature of Registered Agent	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VD () O'BRIEN, WILLIA 5001 S. MIAMI E DURHAM, NC 2	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ATKINS, JOHN L 5001 S. MIAMI E DURHAM, NC 2	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) ATKINSON, C. B 5001 S. MIAMI E DURHAM, NC 2	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () LACY, DUDLEY 5001 S. MIAMI E DURHAM, NC 2	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ANDREW ZWIAG 5001 S. MIAMI E DURHAM, NC 2	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GREGORY MILL 5001 S. MIAMI E DURHAM, NC 2	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JOHN L. ATKINS, III D 04/18/2008