

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2007 JAN 18 PM 12:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



12072006 Chg-P CR2E034 (11/05)

4. FEI Number **63-0274273** Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Amended AR is \$61.25**

9. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00** May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCED ☐ Delete  
NAME RATCLIFFE, DAVID M  
STREET ADDRESS 30 IVAN ALLEN JR. BOULEVARD  
CITY-ST-ZIP ATLANTA, GA 30308

TITLE ☐ Change ☐ Addition  
NAME **300082283603**  
STREET ADDRESS 01/24/07--01035--023  
CITY-ST-ZIP **\*\*88.75**

TITLE EVP ☐ Delete  
NAME JAMES, ANTHONY R  
STREET ADDRESS 30 IVAN ALLEN JR. BOULEVARD  
CITY-ST-ZIP ATLANTA, GA 30308

TITLE ☐ Change ☐ Addition  
NAME **300082283603**  
STREET ADDRESS 12/28/06--01003--006  
CITY-ST-ZIP **\*\*26.25**

TITLE SVPT ☐ Delete  
NAME GREENE, KIMBERLY S  
STREET ADDRESS 30 IVAN ALLEN JR. BOULEVARD  
CITY-ST-ZIP ATLANTA, GA 30308

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME ROBERTS, PATRICIA L  
STREET ADDRESS 30 IVAN ALLEN JR BOULEVARD  
CITY-ST-ZIP ATLANTA, GA 30308

TITLE ☐ Change ☐ Addition  
NAME **300082283603**  
STREET ADDRESS 12/06/06--01054--013  
CITY-ST-ZIP **\*\*35.00**

TITLE AS ☐ Delete  
NAME DABBS, SAM H JR  
STREET ADDRESS 30 IVAN ALLEN JR. BOULEVARD  
CITY-ST-ZIP ATLANTA, GA 30308

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME C. Ashley Baker  
STREET ADDRESS VP 30 Ivan Allen Jr. Blvd  
CITY-ST-ZIP Atlanta, GA 30308

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-22-06

Date

404-506-0595

Daytime Phone #

1/18/07