

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836338

FILED
Jan 29, 2008
Secretary of State

Entity Name: STEVENS & WILKINSON OF SOUTH CAROLINA, INC.

Current Principal Place of Business:

P.O. DRAWER 7
COLUMBIA, SC 292020007

New Principal Place of Business:

Current Mailing Address:

100 PEACHTREE STREET
STE 2500
ATLANTA, GA 30303 US

New Mailing Address:

FEI Number: 58-1051969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT 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: PD () Delete
Name: LYLES, ROBERT T
Address: 705 KAWANA ROAD
City-St-Zip: COLUMBIA, SC

Title: VD () Delete
Name: BRANHAM, BRIAN K
Address: 1501 MAIN STREET
City-St-Zip: COLUMBIA, SC 29202

Title: STVD () Delete
Name: MORRIS, E. LEE III
Address: 100 PEACHTREE ST. NW
City-St-Zip: ATLANTA, GA 30303

Title: VD () Delete
Name: GRESSETTE, ASHBY T
Address: 1501 MAIN STREET
City-St-Zip: COLUMBIA, SC 29202

Title: VD () Delete
Name: MORR, DEAN H
Address: 1501 MAIN STREET
City-St-Zip: COLUMBIA, SC 29202

Title: VD () Delete
Name: HAWSEY, ROBERT E
Address: 1501 MAIN STREET
City-St-Zip: COLUMBIA, SC 29202

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
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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 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: E. LEE MORRIS, III

Electronic Signature of Signing Officer or Director

STVD

01/29/2008

Date