

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842957

FILED
Feb 11, 2009
Secretary of State

Entity Name: JORDAN, JONES & GOULDING, INC.

Current Principal Place of Business:

3300 PGA BLVD
SUITE 780
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

6801 GOVERNORS LAKE PARKWAY
SUITE 200
NORCROSS, GA 30071

New Mailing Address:

FEI Number: 58-0907412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOBLISCH, WALTER C
8513 LEGEND CLUB DR
WEST PALM BEACH, FL 33412 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: CEO () Delete
Name: ALLEN, DONALD R.
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

Title: VP () Delete
Name: GOULDING, RANDOLPH,
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

Title: CHA () Delete
Name: CLARK, EDWARD A,
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

Title: COO () Delete
Name: BUTTON, CHARLES A
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

Title: TS () Delete
Name: BERLIN, SHIRLEY B
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

Title: VP () Delete
Name: CAIN, MACK R ASS VP
Address: 6801 GOVERNORS LAKE PKWY
City-St-Zip: NORCROSS, GA 30071

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:

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: DALE WHITEHOUSE

ASTC

02/11/2009

Electronic Signature of Signing Officer or Director

_____ Date