

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848688

FILED  
Feb 23, 2011  
Secretary of State

Entity Name: DAVIS, MENDEL & REGENSTEIN, INC.

**Current Principal Place of Business:**

2100 RIVER EDGE PARKWAY  
SUITE 750  
ATLANTA, GA 30328 US

**New Principal Place of Business:**

**Current Mailing Address:**

2100 RIVER EDGE PARKWAY  
SUITE 750  
ATLANTA, GA 30328 US

**New Mailing Address:**

FEI Number: 58-1412594      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DAVIS, NATHAN E CHAIRMA  
600 BIRD BAY DR.  
VENICE, FL 34292 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

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: DAVIS, NATHAN E CHAIRMA  
Address: 176 COASTAL HAMMOCK CT.  
City-St-Zip: OSPRY, FL 34229 US

Title: PD  
Name: REGENSTEIN, J K PRESIDE  
Address: 4666 SENTINEL POST ROAD  
City-St-Zip: ATLANTA, GA 30327 US

Title: SD  
Name: FIELDS, JEANELLE W SECRETA  
Address: 464 FRASIER STREET  
City-St-Zip: MARIETTA, GA 30060 US

Title: MD  
Name: RAYMOND, GEOFFREY P DIRECTO  
Address: 4201 LOS PALMAS WAY  
City-St-Zip: SARASOTA, FL 34238 US

Title: CEO  
Name: SANDERS, JAMES M  
Address: 45 HILLTOP ROAD  
City-St-Zip: WESTON, MA 02493 US

Title: MD  
Name: SCHUSTER, ROBERT  
Address: 454 SPADARO DRIVE  
City-St-Zip: VENICE, FL 34285

I hereby 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 all other like empowered.

SIGNATURE: JEANELLE W. FIELDS

SD

02/23/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date