2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# F00000002663

Entity Name: THORPE BUILDING SERVICES, INC.

Current Principal Place of Business:

400 GALLERIA PARKWAY
SUITE 470
ATLANTA, GA 30339

New Principal Place of Business:

400 GALLERIA PARKWAY SW
SUITE 470
ATLANTA, GA 30339

Current Mailing Address:

400 GALLERIA PARKWAY
SUITE 470
ATLANTA, GA 30339

New Mailing Address:

400 GALLERIA PARKWAY SW
SUITE 470
ATLANTA, GA 30339

FEI Number: 58-1561049 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARRELL, DAVID
1050 BECKSTROM DRIVE
OVIEDO, FL 32765 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: THORPE, SARAH B
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

Title: BD ( ) Delete
Name: THORPE, CARY B
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

Title: PRES ( ) Delete
Name: THORPE, WILLIAM B
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

Title: SEC ( ) Delete
Name: WILLIAMSON, CATHERINE T
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

Title: TREA ( ) Delete
Name: THORPE, GEORGE W JR
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

Title: CFO ( ) Delete
Name: LOTT, MELODY
Address: 400 GALLERIA PARKWAY SUITE470
City-St-Zip: ATLANTA, GA 30339

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BD (X) Change ( ) Addition
Name: YANIGER, EDEN
Address: 400 GALLERIA PARKWAY SUITE 470
City-St-Zip: ATLANTA, GA 30339

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: MELODY LOTT CFO 04/13/2008

Electronic Signature of Signing Officer or Director — Date