

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003378

FILED  
Jan 07, 2004  
Secretary of State

Entity Name: PRAEOS TECHNOLOGIES, INC.

**Current Principal Place of Business:**

1776 PEACHTREE ST., STE 601 SOUTH  
ATLANTA, GA 30309

**New Principal Place of Business:**

1230 PEACHTREE ROAD NE  
18TH FLOOR  
ATLANTA, GA 30309

**Current Mailing Address:**

1776 PEACHTREE ST., STE 601 SOUTH  
ATLANTA, GA 30309

**New Mailing Address:**

1230 PEACHTREE ROAD NE  
18TH FLOOR  
ATLANTA, GA 30309

FEI Number: 58-2262875

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TABB, IAN  
710 VILLAGE WAY  
PALM HARBOR, FL 34683 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: P ( ) Delete  
Name: EGAN JR, JAMES P  
Address: 1979 PALIFOX DR NE  
City-St-Zip: ATLANTA, GA 30307

Title: S ( ) Delete  
Name: MYHAND, MELISSA L  
Address: 1979 PALIFOX DR NE  
City-St-Zip: ATLANTA, GA 30307

Title: V ( ) Delete  
Name: ECKHAUS, JEFFREY K  
Address: 4747 GREAT HERON CIRCLE  
City-St-Zip: FAIRFAX, VA 22033

Title: V ( ) Delete  
Name: PEARSALL, TODD  
Address: 5412 MEADOW POND DR  
City-St-Zip: ELLICOTT CITY, MD 21043

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELISSA MYHAND

S

01/07/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date