

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004574

FILED
Mar 02, 2005
Secretary of State

Entity Name: MFS OF GEORGIA CORPORATION

Current Principal Place of Business:

4901 OLDE TOWNE PKWY, STE 125
MARIETTA, GA 30068

New Principal Place of Business:

Current Mailing Address:

4901 OLDE TOWNE PKWY, STE 125
MARIETTA, GA 30068

New Mailing Address:

FEI Number: 58-1945329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARKINS, CLINT A
169 SABAL DR
FT MYERS BEACH, FL 33931 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: CP () Delete
Name: EDGERTON, C. BOYD
Address: 1950 CLINTON DR
City-St-Zip: MARIETTA, GA 30062

Title: STD () Delete
Name: ROBINSON, JOHN E
Address: 2996 NESTLE CREEK DR
City-St-Zip: MARIETTA, GA 30062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN E. ROBINSON

STD

03/02/2005

Electronic Signature of Signing Officer or Director

Date