

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004674

FILED
Apr 23, 2007
Secretary of State

Entity Name: COMMUNITY HOLDINGS OF GEORGIA, INC.

Current Principal Place of Business:

3500 COLONNADE PARKWAY, SUITE 600
BIRMINGHAM, AL 35243

New Principal Place of Business:

Current Mailing Address:

3500 COLONNADE PARKWAY, SUITE 600
BIRMINGHAM, AL 35243

New Mailing Address:

FEI Number: 63-1253949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PC () Delete
Name: BARRETT, DONNA J
Address: 3500 COLONNADE PARKWAY, SUITE 600
City-St-Zip: BIRMINGHAM, AL 35243

Title: S () Delete
Name: LINDLEY, THOMAS J III
Address: 1706 NOLE DR
City-St-Zip: JEFFERSONVILLE, IN 47130

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 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: JOHN C. BAGWELL

VP

04/23/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date