2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006973

Entity Name: THE PRISM NETWORK, INC.

FILED Apr 03, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
5620 GLENRIDGE DRIVE, N.E. ATLANTA, GA 30342				1001 SUMMIT BLVD. ATLANTA, GA 30319		
Current Mailing Address:				New Mailing Address:		
5620 GLENRIDGE DRIVE, N.E. ATLANTA, GA 30342				P. O. BOX 5047 ATLANTA, GA 30302		
FEI Number:	58-2479691	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324					
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.						
SIGNATUR						
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ()[THOMAS, LARRY 3728 PHILIPS HV JACKSONVILLE,	NY., #64		Title: Name: Address: City-St-Zip:	() Change()Addition
Title: Name: Address: City-St-Zip:	VD () E SWAIN, W B 5620 GLENRIDG ATLANTA, GA 30			Title: Name: Address: City-St-Zip:	VD (X SWAIN, W B 1001 SUMMIT ATLANTA, GA	
Title: Name: Address: City-St-Zip:	SD () I NELSON, ALLEN 5620 GLENRIDG ATLANTA, GA 30	E DRIVE., N.E.		Title: Name: Address: City-St-Zip:	SD (X NELSON, ALLE 1001 SUMMIT ATLANTA, GA	BLVD.
Title: Name: Address: City-St-Zip:	T () E CAPORASO, JOS 5620 GLENRIDO ATLANTA, GA 30	E DRIVE., N.E.		Title: Name: Address: City-St-Zip:	T (X CAPORASO, J 1001 SUMMIT ATLANTA, GA	BLVD.
Title: Name: Address: City-St-Zip:	D ()E PORTER, PHILIF 5620 GLENRIDG ATLANTA, GA 30	E DR NE		Title: Name: Address: City-St-Zip:	D (X PORTER, PHIL 1001 SUMMIT ATLANTA, GA	BLVD.
Title: Name: Address: City-St-Zip:	CBD ()[CRAWFORD, TH 5620 GLENRIDG ATLANTA, GA 30	E DRIVE, N.E.		Title: Name: Address: City-St-Zip:	CBD (X CRAWFORD, 1 1001 SUMMIT ATLANTA, GA	BLVD.

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: ALLEN W. NELSON SD 04/03/2008