

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000627

Entity Name: GE EDG, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

4200 WILDWOOD PARKWAY
ATLANTA, GA 30339

New Principal Place of Business:

4200 WILDWOOD PARKWAY
ATLANTA, GA 30339 US

Current Mailing Address:

PO BOX 2216
SCHENECTADY, NY 123012216

New Mailing Address:

PO BOX 2216
SCHENECTADY, NY 123012216 US

FEI Number: 52-2291984

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: P () Delete
Name: ZAIMI, SHARIAR
Address: 1825 K STREET
City-St-Zip: WASHINGTON, DC 20006

Title: V () Delete
Name: MAKARECHI, SHAHDAD
Address: 1825 K ST
City-St-Zip: WASHINGTON, DC 20006

Title: TS () Delete
Name: FERNANDEZ, ANDRE
Address: 2018 POWERS FERRY RD. STE 500
City-St-Zip: ATLANTA, GA 30339

Title: DCEO () Delete
Name: SHEPPARD, JAMES S
Address: 2018 POWERS FERRY RD. STE 500
City-St-Zip: ATLANTA, GA 30339

Title: VP (X) Delete
Name: CAMEROS, BARBARA A
Address: 12 CORP WOODS BLVD
City-St-Zip: ALBANY, NY 12211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHARIAR
Address: 1825 K STREET
City-St-Zip: WASHINGTON, DC 20006 US

Title: T (X) Change () Addition
Name: ANDRE
Address: 2018 POWERS FERRY RD. STE 500
City-St-Zip: ATLANTA, GA 30339 US

Title: D (X) Change () Addition
Name: JAMES
Address: 2018 POWERS FERRY RD. STE 500
City-St-Zip: ATLANTA, GA 30339 US

Title: V (X) Change () Addition
Name: BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

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: BARBARA CAMERON

V

04/15/2009

Electronic Signature of Signing Officer or Director

Date