

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003173

FILED  
Mar 19, 2007  
Secretary of State

Entity Name: ALLGOOD SERVICES OF GEORGIA, INC.

## Current Principal Place of Business:

2385 SATELLITE BLVD.  
100  
DULUTH, GA 30096

## New Principal Place of Business:

3203 WALLER ST  
JACKSONVILLE, FL 32254

## Current Mailing Address:

2385 SATELLITE BLVD  
100  
DULUTH, GA 30096

## New Mailing Address:

FEI Number: 58-1934391      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAIRCHILD, RONALD D  
1000 RIVERSIDE AVE SUITE 100  
JACKSONVILLE, FL 32204 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: PD ( ) Delete  
Name: ALLGOOD JR, JAMES L  
Address: 106 ROOSEVELT ST.  
City-St-Zip: DUBLIN, GA

Title: S ( ) Delete  
Name: TINDOL, CHARLES L  
Address: 2385 SATELLITE BLVD.  
City-St-Zip: DULUTH, GA 30096

Title: T ( ) Delete  
Name: TINDOL, RUFUS L  
Address: 2385 SATELLITE BLVD. STE. 100  
City-St-Zip: DULUTH, GA 30096

Title: D ( ) Delete  
Name: TINDOL, WILLIAM P  
Address: 2385 SATELLITE BLVD. STE. 100  
City-St-Zip: DULUTH, GA 30096

Title: D ( ) Delete  
Name: TINDOL, MICHAEL S  
Address: 2385 SATELLITE BLVD. STE. 100  
City-St-Zip: DULUTH, GA 30096

## 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:

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: SHIRLEY A ADAMS

FILE

03/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date