2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006
Secretary of State

DOCUMENT# F01000004233

Entity Name: ACUITY SPECIALTY PRODUCTS GROUP, INC.

Current Principal Place of Business:

1170 PEACHTREE STREET NE
SUITE 2400
ATLANTA, GA 30309

New Principal Place of Business:

Current Mailing Address:

1170 PEACHTREE ST NE
STE 2400
ATLANTA, GA 30309

New Mailing Address:

FEI Number: 58-2633373 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	DIR	( ) Delete
Name:	NAGEL, VERNON J	
Address:	1170 PEACHTREE ST NE #2400	
City-St-Zip:	ATLANTA, GA 30309	
Title:	CEO	( ) Delete
Name:	HEAGLE, JAMES H	
Address:	4401 NORTHSIDE PARKWAY	
City-St-Zip:	ATLANTA, GA 30327	
Title:	CFO	( ) Delete
Name:	EHRIE, JOHN W	
Address:	4401 NORTHSIDE PARKWAY	
City-St-Zip:	ATLANTA, GA 30327	
Title:	EVP	( ) Delete
Name:	MURPHY, KENYON W	
Address:	1170 PEACHTREE ST NE #2400	
City-St-Zip:	ATLANTA, GA 30309	
Title:	SEC	( ) Delete
Name:	HELEN, HAINES D	
Address:	1170 PEACHTREE ST NE #2400	
City-St-Zip:	ATLANTA, GA 30309	
Title:	TREA	( ) Delete
Name:	SMITH, C. DAN	
Address:	1170 PEACHTREE ST NE #2400	
City-St-Zip:	ATLANTA, GA 30309	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	CFO	(X) Change ( ) Addition
Name:	BACHMANN, MARK R	
Address:	4401 NORTHSIDE PARKWAY	
City-St-Zip:	ATLANTA, GA 30327	
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: HELEN D. HAINES SEC 04/05/2006

Electronic Signature of Signing Officer or Director — Date