

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005341

FILED
Jun 30, 2005
Secretary of State

Entity Name: DOUGHERTY SCHROEDER & ASSOCIATES, INC.

Current Principal Place of Business:

211 PERIMETER CENTER PARKWAY
SUITE 900
ATLANTA, GA 30346

New Principal Place of Business:

Current Mailing Address:

211 PERIMETER CENTER PARKWAY
SUITE 900
ATLANTA, GA 30346

New Mailing Address:

FEI Number: 58-2463213

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHROEDER, DAVID
Address: 555 NORTHPOINT CENTER EAST
City-St-Zip: ALPHARETTA, GA 30022

Title: STD () Delete
Name: DOUGHERTY, KEVIN
Address: 555 NORTH POINT CENTER EAST
City-St-Zip: ALPHARETTA, GA 30022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/D (X) Change () Addition
Name: SCHROEDER, DAVID E
Address: 211 PERIMETER CENTER PARKWAY, SUITE 900
City-St-Zip: ATLANTA, GA 30346

Title: STD (X) Change () Addition
Name: DOUGHERTY, KEVIN
Address: 211 PERIMETER CENTER PARKWAY
City-St-Zip: ATLANTA, GA 30346

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID E. SCHROEDER

SD

06/30/2005

Electronic Signature of Signing Officer or Director

Date