

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005574

FILED
May 01, 2008
Secretary of State

Entity Name: WORLD GROUP SECURITIES, INC.

Current Principal Place of Business:

11315 JOHNS CREEK PARKWAY
DULUTH, GA 30097

New Principal Place of Business:

Current Mailing Address:

11315 JOHNS CREEK PARKWAY
ATTN: LEGAL DEPT.
DULUTH, GA 30097

New Mailing Address:

11315 JOHNS CREEK PARKWAY
DULUTH, GA 30097

FEI Number: 42-1517006

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: CP () Delete
Name: PALMER, KEVIN L
Address: 11315 JOHNS CREEK PKWY
City-St-Zip: DULUTH, GA 30097

Title: D () Delete
Name: LINDER, JACK D
Address: 11315 JOHNS CREEK PARKWAY
City-St-Zip: DULUTH, GA 30097

Title: S () Delete
Name: EASLEY, LEESA M
Address: 11315 JOHNS CREEKS PKWY
City-St-Zip: DULUTH, GA 30097

Title: VPT () Delete
Name: MOATE, NANCY A
Address: 11315 JOHNS CREEK PKWY
City-St-Zip: DULUTH, GA 30097

Title: VP () Delete
Name: JOSEPH, JOHN W
Address: 11315 JONES CREEK PKWY
City-St-Zip: DULUTH, GA 30097

Title: VP () Delete
Name: POSADA, PATRICIA
Address: 11315 JOHNS CREEK PARKWAY
City-St-Zip: DULUTH, GA 30097

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:

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: LEESA M EASLEY

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05/01/2008

Electronic Signature of Signing Officer or Director

Date