## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000001945

Address:

City-St-Zip:

730 RIVER CLIFF CT

SUWANEE, GA 30024

Entity Name: JUDICIAL CORRECTION SERVICES, INC.

FILED Jan 19, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1735 BUFORD HWY 327 DAHLONEGA ST SUITE 215 #308 STE 1003 CUMMING, GA 30041 CUMMING, GA 30040 **Current Mailing Address: New Mailing Address:** 1735 BUFORD HWY 327 DAHLONEGA ST SUITE 215 #308 STE 1003 CUMMING, GA 30041 CUMMING, GA 30040 FEI Number: 58-2665147 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GORLIN, JARRETT S 1234 AIRPORT RD. STE 109 DESTIN, FL 32541 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: COO ( ) Delete Title: () Change () Addition SANDERS, J DENNIS Name: Name: POB 762 Address: Address: City-St-Zip: WEDOWEE, AL 36278 City-St-Zip: Title: Title: () Delete () Change () Addition Name: GORLIN, JARRETT S Name: 3172 ASHFORD DUNWOODY RD Address: Address: ATLANTA, GA 30319 City-St-Zip: City-St-Zip: Title: Title: COB () Delete () Change () Addition MCMICHAEL, ROBERT H Name: Name: 490 MANFORD RD SW Address: Address: City-St-Zip: ATLANTA, GA 30310 City-St-Zip: Title: CFO () Delete Title: () Change () Addition FARRAHAR, CHARLES D Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CHARLES FARRAHAR CFO 01/19/2007