



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2008 8:00 am
Secretary of State

06-25-2008 90009 048 ***150.00

DOCUMENT # F02000003593			
1. Entity Name TRANSCEND SERVICES, INC.			
Principal Place of Business 945 EAST PACES FERRY RD., STE. 1475 ATLANTA, GA 30326		Mailing Address 945 EAST PACES FERRY RD., STE. 1475 ATLANTA, GA 30326	
2. Principal Place of Business - No P.O. Box # One Glenlake Pkwy Ste 1325 Atlanta GA 30325		3. Mailing Address Same	
Suite, Apt. #, etc. 1325		Suite, Apt. #, etc. Same	
City & State Atlanta GA		City & State Atlanta GA	
Zip 30325		Zip 30326	
Country USA		Country USA	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO GERDES, LARRY 945 EAST PACES FERRY RD., STE. 1475 ATLANTA, GA 30326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Please see attached <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPOO MCGROGAN, SUSAN COO 945 EAST PACES FERRY RD SUITE 1425 ATLANTA, GA 30326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOT CORNALL, LANCE B 945 E. PALES TERRY RD STE 1475 ATLANTA, GA 30326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, JOSEPH P 945 EAST PACES FERRY RD., STE. 1475 ATLANTA, GA 30326 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		6/18/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

40109053



06062008 Chg-P CR2E034 (12/06)

4. FEI Number
33-0378756

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Transcend Services, Inc
FEIN # 33-0378756

ATTACHMENT

410109053

F02000003593

Officers

Larry G. Gerdes - President/Chief Executive Officer/Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Lance B. Cornell - Chief Financial Officer/Secretary/Treasurer
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Susan McGrogan - Chief Operating Officer
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Jeffrey McKee - Senior Vice President of Sales and Marketing
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Directors

Larry G. Gerdes-CEO/Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Joseph P. Clayton-Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Walter S. Huff, Jr-Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Charles E Theole-Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

James D. Edwards - Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Sidney V. Sack - Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A

Joseph G Bleser - Director
One Glenlake Parkway NE Ste 1325
Atlanta, GA 30328
Term Expire Date: N/A



ATTACHMENT
46109053

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2008

TRANSCEND SERVICES, INC.
ONE GLENLAKE PARKWAY
SUITE 1325
ATLANTA, GA 30328

SUBJECT: TRANSCEND SERVICES, INC.
Ref. Number: F02000003593

We have received your document for TRANSCEND SERVICES, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Kathy Ashton
Regulatory Specialist II

Letter Number: 308A00035275

→ We didn't rec'd any additional notices.

Thank You
IVORY PARRIS DUNN
678-808-0661

46109053

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Document Number F02000003593
Business Entity Name TRANSCEND SERVICES, INC.
Prior notice was Not Received
FEI Number 330378756
FEI Number Status
Certificate of Status Desired No

Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Mailing Address

Address ONE GLENLAKE PARKWAY, STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Name And Address of Registered Agent

RA Business Name CT CORPORATION SYSTEM
Address 1200 S. PINE ISLAND ROAD
City, State PLANTATION, FL
Zip Code & Country 33324 US
Registered Agent Signature IVORY PARRIS-DUNN

Officer/Director Name And Address

Name And Address #1

Title CEO
Name (Last, First, Middle, Title) GERDES, LARRY
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

ATTACHMENT

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F02000003593

Name And Address #2

Title VPOO
Name (Last, First, Middle, Title) MCGROGAN, SUSAN , COO
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Name And Address #3

Title CFOT
Name (Last, First, Middle, Title) CORNALL, LANCE , B
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Name And Address #4

Title D
Name (Last, First, Middle, Title) CLAYTON, JOSEPH , P
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Name And Address #5

Title CEOD
Name (Last, First, Middle, Title) GERDES, LARRY , G
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Name And Address #6

Title D
Name (Last, First, Middle, Title) CLAYTON, JOSEPH , P
Street Address ONE GLENLAKE PARKWAY STE 1325
City, State ATLANTA, GA
Zip Code & Country 30328

Title CFO
Officer/Director Signature LANCE CORNELL

ATTACHMENT
40109083

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DIVISION OF CORPORATIONS



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Document Number #- F02000003593

The charge amount for your filing is \$150.00

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In order to complete this transaction you must select one of the payment options listed below.

If you press the 'Credit Card Payment' button from this screen, you will be sent to the payment screen to be charged for this filing.

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Password

E-mail Address

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