

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001924

FILED
Apr 24, 2006
Secretary of State

Entity Name: PATTILLO PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

5830 EAST PONCE DE LEON AVENUE
STONE MOUNTAIN, GA 30085

New Principal Place of Business:

Current Mailing Address:

5830 EAST PONCE DE LEON AVENUE
STONE MOUNTAIN, GA 30085

New Mailing Address:

FEI Number: 58-2093550

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CALLAHAN, LAWRENCE
Address: 5830 EAST PONCE DE LEON AVENUE
City-St-Zip: STONE MOUNTAIN, GA 30085

Title: VPGM () Delete
Name: EBERHARDT, BUD
Address: 5830 EAST PONCE DE LEON AVENUE
City-St-Zip: STONE MOUNTAIN, GA 30083

Title: S () Delete
Name: KERMAN, MICHAEL G
Address: 999 PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30309

Title: T () Delete
Name: HARRISON, JOSHUA
Address: 5830 EAST PONCE DE LEON AVENUE
City-St-Zip: STONE MOUNTAIN, GA 30083

Title: D () Delete
Name: PARKER, BETH
Address: 5830 EAST PONCE DE LEON AVENUE
City-St-Zip: STONE MOUNTAIN, GA 30083

Title: D () Delete
Name: COHEN, LYNN P
Address: 5830 EAST PONCE DE LEON AVENUE
City-St-Zip: STONE MOUNTAIN, GA 30083

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 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: JOSHUA HARRISON

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04/24/2006

Electronic Signature of Signing Officer or Director

Date