## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000001018

Address:

City-St-Zip:

2700 WYCLIFF RD., STE. 312

RALEIGH, NC 27607

FILED Feb 14, 2007 Secretary of State

Entity Name: CDC MANAGER, INC. **Current Principal Place of Business: New Principal Place of Business:** 25 PARK PLACE, 18TH FL ATLANTA, GA 30303 **Current Mailing Address: New Mailing Address:** C/O TRANSOM DEVELOPMENT, INC. TRANSOM DEVELOPMENT, INC. 2700 WYCLIFF RD, SUITE 312 8521 SIX FORKS ROAD, SUÍTE 200 RALEIGH, NC 27607 RALEIGH, NC 27615 FEI Number: 03-0494051 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: TRANSOM DEVELOPMENT, INC 8226 N WICKHAM RD, SUITE 200 MELBOURNE, FL 32940 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: ( ) Delete Title: () Change () Addition PRIDGEN, WILLIAM H Name: Name: 25 PARK PLACE, 18TH FLOOR Address: Address: City-St-Zip: ATLANTA, GA 30303 City-St-Zip: Title: VΡ Title: () Delete (X) Change ( ) Addition Name: HURST, MICAHEL D Name: HURST, MICAHEL D 2700 WYCLIFF ROAD, SUITE 312 8521 SIX FORKS ROAD, SUITE 200 Address: Address: RALEIGH, NC 27607 RALEIGH, NC 27615 City-St-Zip: City-St-Zip: Title: VP&S ( ) Delete Title: () Change () Addition MCGILLIS, CHRISTINE R Name: Name: 25 PARK PLACE, 18TH FLOOR Address: Address: City-St-Zip: ATLANTA, GA 30303 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition ALETA, HODGES J 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:

VΡ SIGNATURE: ALETA J. HODGES 02/14/2007