

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006857

FILED  
Apr 21, 2010  
Secretary of State

**Entity Name:** CAROLINA RELOCATION GROUP, INC.

**Current Principal Place of Business:**

3221 ZEBULON ROAD, SUITE C  
ROCKY MOUNT, NC 27804

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7697  
ROCKY MOUNT, NC 27804

**New Mailing Address:**

**FEI Number:** 56-1723305

**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:** C  
**Name:** DECKER, BARBARA  
**Address:** 3221 ZEBULON ROAD, SUITE C  
**City-St-Zip:** ROCKY MOUNT, NC 27804

**Title:** D  
**Name:** HULL, H. WILLIAM JR  
**Address:** 3221 ZEBULON ROAD, SUITE C  
**City-St-Zip:** ROCKY MOUNT, NC 27804

**Title:** P  
**Name:** HUTCHINS, GREGORY S  
**Address:** 3221 ZEBULON ROAD, SUITE C  
**City-St-Zip:** ROCKY MOUNT, NC 27804

**Title:** ST  
**Name:** ALDRIDGE, MARGARET D  
**Address:** 3221 ZEBULON ROAD, SUITE C  
**City-St-Zip:** ROCKY MOUNT, NC 27804

I hereby 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 all other like empowered.

**SIGNATURE:** MARGARET D. ALDRIDGE

SEC.

04/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date