

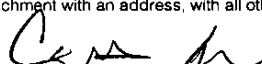


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90196 014 ***150.00

DOCUMENT # F05000004079 1. Entity Name THE PRINCETON RETIREMENT GROUP, INC.					
Principal Place of Business 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534				Mailing Address 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534	
2. Principal Place of Business 1201 Peachtree Street		3. Mailing Address 1201 Peachtree Street			
Suite, Apt. #, etc. 2200		Suite, Apt. #, etc. 2200			
City & State Atlanta, GA		City & State Atlanta, GA			
Zip 30361		Country USA		4. FEI Number 13-4026675	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name no change 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	CEOC FALCON, MICHAEL <input type="checkbox"/> Delete 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOCD Michael Falcon <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1400 Merrill Lynch Drive Pennington, NJ 08534	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DAULERIO, ANTHONY <input type="checkbox"/> Delete 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LINDENBAUM, BARRY <input type="checkbox"/> Delete 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HAYES, CYNTHIA <input type="checkbox"/> Delete 1400 MERRILL LYNCH DRIVE PENNINGTON, NJ 08534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 		CYNTHIA HAYES		04/26/06	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		609-274-6350 <small>Daytime Phone #</small>	