2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004079

Entity Name: THE PRINCETON RETIREMENT GROUP, INC.

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1201 PEACHTREE ST STE 2200 ATLANTA, GA 30361				1201 PEACHTREE ST STE 1950 400 COLONY SQUARE ATLANTA, GA 30361			
Current Mailing Address:				New Mailing Address:			
1201 PEACHTREE ST STE 2200 ATLANTA, GA 30361				1201 PEACHTREE ST STE 1950 400 COLONY SQUARE ATLANTA, GA 30361			
FEI Number:	13-4026675	FEI Number Applied For ()	FEI Numb	er Not Applic	able ()	Certificate of Status D	esired ()
Name and	Address of	Current Registered Agent:	N	lame and A	Address of	f New Registered Age	ent:
1200 SOUT	ORATION SY TH PINE ISLA DN, FL 3332	AND ROAD					
The above in the State		submits this statement for the pur	pose of c	changing its	registered	d office or registered ag	ent, or both,
SIGNATURE:							
	Electro	nic Signature of Registered Agent				Date	
Election Cam	paign Financii	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip:	FALCON, MIC	L LYNCH DRIVE	N A	ïtle: lame: .ddress: city-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DAULERIO, A	L LYNCH DRIVE	N A	iitle: lame: .ddress: city-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	LINDENBAUM	L LYNCH DRIVE	N A	itle: lame: .ddress: city-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	POZNANSKI,	L LYNCH DRIVE	N A	ddress:	GODFREY, N	(X) Change () Addition MICHELLE L HTREE STREET STE 1950 A 30361	
Title: Name: Address: City-St-Zip:	D (FALCON, MIC 1400 MERRIL PENNINGTON	L LYNCH DR	N A	itle: lame: ddress: city-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	N A		AIMEE, DEC 1400 MERRI	() Change (X) Addition AMILLO R LL LYNCH DR N, NJ 08534	

I hereby certify that the information supplied with this filing does not qualify 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: MICHELLE L GODFREY DP 04/21/2008