2007 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 06, 2007 8:00 am
Secretary of State
05-08-2007 90019 034 ***150.00

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1. Entity Name
ATHENS VEST, INC.

Principal Place of Business	Mailing Address
6111 PEACHTREE DUNWOODY ROAD, SUITE B-102 ATLANTA, GA 30328	6111 PEACHTREE DUNWOODY ROAD, SUITE B-102 ATLANTA, GA 30328

DO NOT WRITE IN THIS SPACE

04242007 No Chg-P CR2E034 (11/05)

4. FEI Number
58-1982457
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	COLLINS, WILLIAM R JR.
STREET ADDRESS	6111 PEACHTREE DUNWOODY ROAD, SUITE B-102
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	V
NAME	HORTON, JENNIFER W
STREET ADDRESS	6111 PEACHTREE DUNWOODY ROAD, SUITE B-102
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 4/26/07 770-391-1993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #