

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006094

Entity Name: ICON RESTORATION, INC.

FILED  
Jan 11, 2012  
Secretary of State

## Current Principal Place of Business:

314 GREENVILLE STREET  
LAGRANGE, GA 30240

## New Principal Place of Business:

1000 LONGLEY PLACE  
LAGRANGE, GA 30240

## Current Mailing Address:

PO BOX 1287  
LAGRANGE, GA 30241

## New Mailing Address:

FEI Number: 58-2450546      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1201 PEACHTREE STREET, NE  
ATLANTA, FL 30361      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

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: LANGFORD, ALAN P  
Address: 314 GREENVILLE STREET  
City-St-Zip: LAGRANGE, GA 30241

Title: CFO  
Name: LANGFORD, STEVEN E  
Address: 314 GREENVILLE STREET  
City-St-Zip: LAGRANGE, GA 30241

Title: S  
Name: TURNER, JANET  
Address: 314 GREENVILLE STREET  
City-St-Zip: LAGRANGE, GA 30241

Title: PRES  
Name: BRANNON, SAMUEL V  
Address: 134 MORGAN DRIVE  
City-St-Zip: LAGRANGE, GA 30240

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: JANET C. TURNER

CS

01/11/2012

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

\_\_\_\_\_  
Date