2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006600

Entity Name: CONCORDIA REALTY SERVICES, INC.

200 MANSELL COURT EAST STE 440

ROSWELL, GA 30076

Address:

City-St-Zip:

FILED Mar 03, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal	New Principal Place of Business:		
200 MANSELL COURT EAST STE 440 ROSWELL, GA 30076			SUITE 440	200 MANSELL COURT EAST SUITE 440 ROSWELL, GA 30076		
Current M	lailing Addres	s:	New Mailing A	New Mailing Address:		
200 MANSELL COURT EAST STE 440 ROSWELL, GA 30076			SUITE 440	200 MANSELL COURT EAST SUITE 440 ROSWELL, GA 30076		
FEI Number	: 58-2189830	FEI Number Applied For ()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:		
23223 FRO PANAMA	O, RICHARD A ONT BEACH R CITY BEACH,	OAD #G602 FL 32413 US	ournose of changing its re	gistered office or registered agent, or l	both	
	e of Florida.	submits this statement for the p	ourpose or changing its re	gistered office of registered agent, or i	JOH1,	
SIGNATU						
	Electror	ic Signature of Registered Ag	ent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROSE, R KENT	COURT EAST STE 440	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DIPPOLITO, RI	COURT EAST STE 440	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	S () MUSTAKI, AUD	Delete REY	Title: Name:	() Change () Addition		

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.

Address:

City-St-Zip:

SIGNATURE: R. KENT ROSE PRES 03/03/2009