## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000000413

Entity Name: DIMENSIONAL RESEARCH, INC

FILED Apr 13, 2007 Secretary of State

	BliviError	OTTAL TREGER TROTT, ITTO.						
Current Principal Place of Business:				New Principal Place of Business:				
200 NORTH COBB PARKWAY SUITE 140 MARIETTA, GA 30062				1234 AIRPORT ROAD SUITE 105 DESTIN, FL 32541				
Current Mailing Address:				New Mailing Address:				
200 NORTH COBB PARKWAY SUITE 140 MARIETTA, GA 30062				1234 AIRPORT ROAD SUITE 105 DESTIN, FL 32541				
FEI Number:	20-3774470	FEI Number Applied For ( )	FEI Num	nber Not Appl	icable ( )	Certificate of Status Desir	red ( )	
Name and	Address of C	Current Registered Agent:		Name and	Address of I	New Registered Agent:		
1201 HAYS		CE COMPANY 012525 US						
The above in the State		submits this statement for the p	urpose of	f changing i	ts registered o	office or registered agent	t, or both,	
SIGNATUR	RE:							
	Electror	ic Signature of Registered Age	nt			Date		
Election Can	npaign Financin	g Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	KOENEMAN, R	H COBB PARKWAY		Title: Name: Address: City-St-Zip:	KOENEMAN, R	ΓROAD, STE. 105		
Title: Name: Address: City-St-Zip:	THOMAS, JOH	H COBB PARKWAY		Title: Name: Address: City-St-Zip:	THOMAS, JOH	TH COBB PARKWAY		
Title: Name: Address: City-St-Zip:	GORLIN, STEV	H COBB PARKWAY		Title: Name: Address: City-St-Zip:	GORLIN, STE	Γ ROAD, STE. 105		
Title: Name: Address: City-St-Zip:	BELL, MARTIN	H COBB PARKWAY		Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	( )	) Delete		Title: Name: Address: City-St-Zip:	ODER, JOSEP	ΓROAD, STE. 105		

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH E. ODER CEO 04/13/2007