

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007939

Entity Name: ADAMS & BLAIR, INC.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

1921 GORNT0 ROAD
UNIT #8
VALDOSTA, GA 31602

New Principal Place of Business:

906 INTERSTATE RIDGE DRIVE
SUITE A
GAINESVILLE, GA 30501

Current Mailing Address:

906 INTERSTATE RIDGE DRIVE
SUITE A
GAINESVILLE, GA 30501

New Mailing Address:

FEI Number: 20-5980152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAN ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: ADAMS, G. NEARING
Address: 1921 GORNT0 ROAD, UNIT #8
City-St-Zip: VALDOSTA, GA 31602

Title: VCVP () Delete
Name: BLAIR, JOSEPH
Address: 1921 GORNT0 ROAD, UNIT #8
City-St-Zip: VALDOSTA, GA 31602

Title: ST () Delete
Name: FURNIA, MARK
Address: 906 INTERSTATE RIDGE DR, SUITE A
City-St-Zip: GAINESVILLE, GA 30501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: ADAMS, G. NEARING
Address: 906 INTERSTATE RIDGE DR, SUITE A
City-St-Zip: GAINESVILLE, GA 30501

Title: VCVP (X) Change () Addition
Name: BLAIR, JOSEPH
Address: 906 INTERSTATE RIDGE DR, SUITE A
City-St-Zip: GAINESVILLE, GA 30501

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK FURNIA

CFO

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date