

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001990

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: JOVA/DANIELS/BUSBY INCORPORATED

**Current Principal Place of Business:**

400 COLONY SQUARE, SUITE 700  
1201 PEACHTREE ST, NE  
ATLANTA, GA 30361

**New Principal Place of Business:**

**Current Mailing Address:**

400 COLONY SQUARE, SUITE 700  
1201 PEACHTREE ST, NE  
ATLANTA, GA 30361

**New Mailing Address:**

FEI Number: 58-1021002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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: C      ( ) Delete  
Name: DANIELS, STANLEY L  
Address: 1327 BEECHWOOD HILLS COURT  
City-St-Zip: ATLANTA, GA 30327

Title: P      ( ) Delete  
Name: ABERNATHY, ROY L  
Address: 1113 CHATSWORTH DRIVE  
City-St-Zip: AVONDALE ESTATES, GA 30002

Title: VP      ( ) Delete  
Name: AKARD, ANDREW S  
Address: 1326 PASADENA AVE, NE  
City-St-Zip: ATLANTA, GA 30306

Title: S      ( ) Delete  
Name: LAVERTY, JUDY  
Address: 343 HICKS DRIVE  
City-St-Zip: MARIETTA, GA 30060

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: JUDY S. LAVERTY

S

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date