2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005340

Entity Name: CROCKER REALTY OF THOMASVILLE, INC.

FILED Feb 17, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1207 E JACKSON STREET
THOMASVILLE, GA 31792
1207 E JACKSON STREET
1207 EAST JACKSON STREET
THOMASVILLE, GA 31792 US

Current Mailing Address: New Mailing Address:

PO BOX 2685
THOMASVILLE, GA 31799
1207 E JACKSON STREET
1207 EAST JACKSON STREET
THOMASVILLE, GA 31792 US

FEI Number: 58-1259083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BIRD, T. BUCKINGHEM

165 E DOGWOOD ST

MONTICELLO, FL 32345 US

BIRD, T. BUCKINGHEM

165 E DOGWOOD ST

1207 EAST JACKSON STREET

MONTICELLO, FL 32345 US

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: T. BUCKINGHEM BIRD 02/17/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CP

 Name:
 CROCKER, CLAUDE E

 Address:
 551 LOWER BOSTON RD

 City-St-Zip:
 THOMASVILLE, GA 31757 US

Title: VCST

 Name:
 CROCKER, CLAUDIA H

 Address:
 551 LOWER BOSTON RD

 City-St-Zip:
 THOMASVILLE, GA 31757 US

Title: DVP

 Name:
 CROCKER, DANIEL E

 Address:
 129 PARKWAY DRIVE

 City-St-Zip:
 THOMASVILLE, GA 31792 US

Title: CP

 Name:
 CROCKER, CLAUDE E

 Address:
 1207 EAST JACKSON STREET

 City-St-Zip:
 THOMASVILLE, GA 31792 US

Title: CP

 Name:
 CROCKER, CLAUDE E

 Address:
 1207 EAST JACKSON STREET

 City-St-Zip:
 THOMASVILLE, GA 31792 US

Title: CP

 Name:
 CROCKER, CLAUDE E

 Address:
 1207 EAST JACKSON STREET

 City-St-Zip:
 THOMASVILLE, GA 31792 US

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: CLAUDE E. CROCKER CP 02/17/2011