2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003933

FILED
Jun 29, 2009
Secretary of State

Entity Name: THE MAGELLAN GROUP OF GEORGIA, INCORPORATED

Current Principal Place of Business:	**New Principal Place of Business:**
5805 STATE BRIDGE RD., SUITE G237 DULUTH, GA 30097	5805 STATE BRIDGE RD SUITE G237 DULUTH, GA 30097

Current Mailing Address:	**New Mailing Address:**
5805 STATE BRIDGE RD., SUITE G237 DULUTH, GA 30097	5805 STATE BRIDGE RD SUITE G237 DULUTH, GA 30097

FEI Number: 58-1786971   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SIMMONS, GARY L 1426 VALLEY PINE CIR. APOPKA, FL 32712 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: _____

          Electronic Signature of Registered Agent   Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PC	( ) Delete		Title:		( ) Change ( ) Addition
Name:	SHERWOOD, SCOTT			Name:		
Address:	5805 STATE BRIDGE RD., SUITE G237			Address:		
City-St-Zip:	DULUTH, GA 30097			City-St-Zip:		

Title:	ST	( ) Delete		Title:		( ) Change ( ) Addition
Name:	SHERWOOD, BRENDA			Name:		
Address:	5805 STATE BRIDGE RD., SUITE G237			Address:		
City-St-Zip:	DULUTH, GA 30097			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: BRENDA SHERWOOD   ST   06/29/2009
          Electronic Signature of Signing Officer or Director   Date