2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005
Secretary of State

DOCUMENT# F95000005380

Entity Name: SOUTHERN MANAGEMENT DEVELOPMENT, INC.

Current Principal Place of Business:

4000 DEKALB TECHNOLOGY PARKWAY
SUITE 100
ATLANTA, GA 30340

New Principal Place of Business:

Current Mailing Address:

CHERYL SMILEY
270 PEACHTREE STREET
ATLANTA, GA 30303

New Mailing Address:

FEI Number: 58-1646715 **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: PD ( ) Delete
Name: BERTASI, RONALD P
Address: 4000 DEKALB TECHNOLOGY PARKWAY
City-St-Zip: ATLANTA, GA 30340

Title: VP ( ) Delete
Name: GILBERT, ROBERT M
Address: 4000 DEKALB TECHNOLOGY PARKWAY
City-St-Zip: ATLANTA, GA 30340

Title: S ( ) Delete
Name: CHISHOLM, TOMMY
Address: 270 PEACHTREE ST
City-St-Zip: ATLANTA, GA 30303

Title: D ( ) Delete
Name: FANNING, THOMAS A
Address: 270 PEACHTREE ST. NW
City-St-Zip: ATLANTA, GA 30303

Title: AS ( ) Delete
Name: DABBS, SAM H JR
Address: 270 PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30303

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAM DABBS AS 04/12/2005

Electronic Signature of Signing Officer or Director — Date