2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006881

FILED Jan 06, 2009 Secretary of State

Entity Name: COMMONWEALTH FOREST INVESTMENTS, INC.

ullelli	Principal Place	e of Business:	New Princ	New Principal Place of Business:		
	ONT CENTER	2				
UITE 129 TLANTA	50 , GA 30305	US				
urrent Mailing Address:			New Maili	New Mailing Address:		
PIEDM	ONT CENTER	?				
JITE 12(FLANTA	50 ., GA 30305	US				
	r: 51-0344578	FEI Number Applied For()	FEI Number Not Appl	licable ()	Certificate of Status Desired (X)
ıme and	d Address of (Current Registered Agent:	Name and	Address o	f New Registered Agent:	
200 SOU	PORATION SY JTH PINE ISLA ION, FL 3332	ND ROAD				
	e named entity e of Florida.	submits this statement for th	e purpose of changing i	ts registered	d office or registered agent, or b	ooth
GNATU	RE:					
	Electro	nic Signature of Registered /	Agent .		Date	
FICER	S AND DIREC	CTORS:	ADDITION	IS/CHANGE	ES TO OFFICERS AND DIREC	то
le: me: dress: y-St-Zip:	KALMAN, DAV 30 N. THIRD S		Title: Name: Address: City-St-Zip:		() Change () Addition	
e: me: dress: y-St-Zip:	GILBERT, PET 30 N. THIRD S		Title: Name: Address: City-St-Zip:		() Change () Addition	
e: me: dress:	DONLEVY, FR 30 N. THIRD S		Title: Name: Address: City-St-Zip:		() Change () Addition	
	PT () Delete	Title: Name:	PT KELLY, LEC 15 PIEDMOI	NT CENTER, SUITE 1250	
ry-St-Zip: le: me: dress: y-St-Zip:	TARVER, CHA	CENTER, SUITE 1250	Address: City-St-Zip:		A 30303	
y-St-Zip: e: me: dress:	TARVER, CHA 15 PIEDMONT ATLANTA, GA VS (GRICE, SAMU	CENTER, SUITE 1250 30305) Delete EL R CENTER, SUITE 1250			() Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL R GRICE VS 01/06/2009