2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 15, 2008 8:00 am **Secretary of State** DOCUMENT # F97000002490 02-15-2008 90003 003 ***150.00 THD AT-HOME SERVICES, INC. Principal Place of Business Mailing Address 2455 PACES FERRY RD. 2455 PACES FERRY RD. C-20 C-20 ATLANTA, GA 30339 ATLANTA, GA 30339 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02042008 CR2E034 (12/06) Chg-P 4. FEI Number Applied For City & State City & State 75-2698460 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS **DVP** TITLE Delete TITLE ☐ Change X Addition Julian Paul Raines BLAKE, FRANCIS S NAME NAME 2455 Paces Ferry Road 2455 PACES FERRY RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Atlanta, GA 30339 CITY-ST-ZIP ATLANTA, GA 30339 ρ. Addition K Delete TITLE ☐ Change THILE AQUILLANO, SAM NAME George E. Sherman, Jr. NAME STREET ADDRESS 2455 PACES FERRY RD STREET ADDRESS 2455 Paces Ferry Road CITY-ST-ZIP ATLANTA, GA 30339 CITY-ST-7IP Atlanta, GA 30339 VSD DVPS Addition 🔀 Delete ☐ Change TITLE Jack A. VanWoerkom FERNANDEZ, FRANK L NAME 2455 Paces Ferry Road STREET ADDRESS 2455 PACES FERRY RD. STREET ADDRESS CITY-ST-ZIP ATLANTA, GA 30339 CITY-ST-ZIP Atlanta, GA 30339 Addition ☐ Change TITLE DVPT ☐ Delete TITLE Jonathan M. Gottsegen TOME, CAROL B NAME NAME 2455 Paces Ferry Road 2455 PACES FERRY RD. STREET ADDRESS STREET ADDRESS Atlanta, GA 30339 CITY-ST-7IP ATLANTA, GA 30339 CITY-ST-7IP ■ Addition ΑŚ ☐ Defete ☐ Change TITLE TITLE FADELL RITA NAME NAME 2455 PACES FERRY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA, GA 30339 Change ■ Addition TITLE □ Delete TITLE JORDAN, CLAUDE NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

2455 PACES FERRY RD

ATLANTA, GA 30339

Jonathan M.
TURE AND A PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jonathan M. Gottsegen

2/5/08

770-433-8211

Date

FILED