

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005259

FILED
Feb 08, 2006
Secretary of State

Entity Name: SIMONSON, GERMANY, NONEMAKER AND ASSOCIATES, INC.

Current Principal Place of Business:

1190 W. DRUID HILLS DR. NE
T-65
ATLANTA, GA 30329

New Principal Place of Business:

Current Mailing Address:

1190 W. DRUID HILLS DR. NE
T-65
ATLANTA, GA 30329

New Mailing Address:

FEI Number: 58-2009816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PC () Delete
Name: SIMONSON, BRUCE D
Address: 1736 PARLIAMENT DRIVE
City-St-Zip: ATLANTA, GA 30338

Title: SD () Delete
Name: NONEMAKER, BRIAN E
Address: 1039 NERINE CIRCLE
City-St-Zip: ATLANTA, GA 30306

Title: TD () Delete
Name: GERMANY, B MURFF J
Address: 1707 NORTH SPRINGS DRIVE
City-St-Zip: ATLANTA, GA 30338

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: SIMONSON, BRUCE D
Address: 1426 WILLIAMS STREET, #31
City-St-Zip: CHATANOOGA, TN 37408

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 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: B. MURFF GERMANY

SD

02/08/2006

Electronic Signature of Signing Officer or Director

_____ Date