


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90407 050 ***158.75

DOCUMENT # F97000006800 1. Entity Name DHR MECHANICAL SERVICES-GEORGIA, INC.					
Principal Place of Business 105 HOPE ST., STE. 1016 LONGWOOD, FL 32750 US			Mailing Address 105 HOPE ST., STE. 1016 LONGWOOD, FL 32750 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
6. Name and Address of Current Registered Agent GOSLIN, THOMAS ALLAN III 150 HOPE ST., SUITE 1016 LONGWOOD, FL 32750				7. Name and Address of New Registered Agent Name Conley, Charles Eric Street Address (P.O. Box Number is Not Acceptable) 150 Hope St Suite 1016 City Longwood FL Zip Code 32750	
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 <u><i>Charles Eric Conley</i></u> DATE <u>4/19/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP SHUMATE, HAROLD 2805 PREMIER PKWY DULUTH, GA 30097	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S Conley, Charles Eric 150 Hope St, Ste 1016 Longwood Florida 32750	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHUMATE, SANDRA LYNN 2805 PREMIER PKWY DULUTH, GA 30097	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jones, Warner 150 Hope St, Ste 1016 Longwood, Florida 32750	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRITT, MIKHAIL 2805 PREMIER PKWY DULUTH, GA 30097	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Smith, Ron 7083 Main St, Ste 400 Woodstock, GA 30188	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SHUMATE, NANCY 2805 PREMIER PKWY DULUTH, GA 30097	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Conley, Kelley 150 Hope St, Ste 1016 Longwood, Florida 32750	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHUMATE, RHONDA E 2805 PREMIER PKWY DULUTH, GA 30097	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOSLIN, THOMAS ALLAN III 150 HOPE ST. SUITE 1016 LONGWOOD, FL 32750	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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.					
SIGNATURE: <u><i>Thomas Allan Goslin III</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4-19-06</u> Daytime Phone # <u>407-265-0777</u>		

40058873



02072006 Chg-P CR2E034 (11/05)

4. FEI Number
58-2353304

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**