

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002695

FILED
Jan 07, 2008
Secretary of State

Entity Name: ROBERT E. GRESHAM, INC.

Current Principal Place of Business:

5039 B U BOWMAN DRIVE
SUITE 100
BUFORD, GA 30518

New Principal Place of Business:

Current Mailing Address:

PO BOX 3289
SUWANEE, GA 300243289

New Mailing Address:

FEI Number: 58-1404841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, BARBARA
107 HERRON PKWY
WEST PALM BEACH, FL 33411 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: P () Delete
Name: GRESHAM, ROBERT E
Address: 8445 MOOR PARK RUN
City-St-Zip: DULUTH, GA 30097

Title: ST () Delete
Name: GRESHAM, JOAN
Address: 8445 MOOR PARK RUN
City-St-Zip: DULUTH, GA 30097

Title: V () Delete
Name: WILMOT, KATHERINE
Address: 5039 B U BOWMAN DRIVE
City-St-Zip: BUFORD, GA 30518

Title: () Delete
Name:
Address:
City-St-Zip:

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: AVP () Change (X) Addition
Name: DAVIS, STEPHANIE G
Address: 5479 HWY 255 SOUTH
City-St-Zip: CLEVELAND, GA 30528

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

SIGNATURE: ROBERT E. GRESHAM

P

01/07/2008

Electronic Signature of Signing Officer or Director

_____ Date