2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000055151

Entity Name: GBP SERVICES, INC.

TEWELL, ASHLEY I

ATLANTA, GA 30339

2859 PACES FERRY ROAD., STE. 1450

Name: Address:

City-St-Zip:

FILED Mar 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O GABLES RESIDENTIAL TRUST 2859 PACES FERRY RD, OVERLOOK III #1450 ATLANTA, GA 30339 **Current Mailing Address: New Mailing Address:** C/O GABLES RESIDENTIAL TRUST 2859 PACES FERRY RD, OVERLOOK III #1450 ATLANTA, GA 30339 FEI Number: 58-2554502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BASTUBA, JONI K 777 YAMATO ROAD SUITE 510 BOCA RATON, FL 33431 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FITCH, DAVID D Name: Name: 777 YAMATO ROAD, STE. 510 Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: SVPD Title: () Delete (X) Change () Addition Name: BANKS, MARVIN R JR Name: ANSEL, SUSAN M 2859 PACES FERRY ROAD., STE. 1450 2859 PACES FERRY ROAD., STE. 1450 Address: Address: ATLANTA, GA 30339 City-St-Zip: City-St-Zip: ATLANTA, GA 30339 Title: () Delete (X) Change () Addition SVP Title: SVPD SEVERT, DAWN H SEVERT, DAWN H Name: Name: 2859 PACES FERRY ROAD, STE. 1450 2859 PACES FERRY ROAD, STE. 1450 Address: Address: City-St-Zip: ATLANTA, GA 30339 City-St-Zip: ATLANTA, GA 30339 Title: VΡ () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ASHLEY I TEWELL VP 03/16/2006