

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059180

Entity Name: EMRP, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

1360 UNION HILL RD., SUITE 4-E
ALPHARETTA, GA 30004

New Principal Place of Business:

Current Mailing Address:

1360 UNION HILL RD., SUITE 4-E
ALPHARETTA, GA 30004

New Mailing Address:

FEI Number: 04-3807902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYE, THOMAS G
408 W. UNIVERSITY AVE., SUITE 108-B
GAINESVILLE, FL 32601 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: PD () Delete
Name: SMITH, KEITH
Address: 6601 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

Title: SD () Delete
Name: RIDDLE, JAMES S
Address: 3765 CRESTWOOD PL.
City-St-Zip: CUMMING, GA 30041

Title: D () Delete
Name: GARCIA, KARL
Address: 520 GLENLEAF DR.
City-St-Zip: CUMMING, GA 30041

Title: D () Delete
Name: KEMP, WILLIAM
Address: 145 ASHTON CT.
City-St-Zip: ROSWELL, GA 30076

Title: D () Delete
Name: NICHOLSON, JOHN
Address: 687 TRILLIUM LANE
City-St-Zip: LILBURN, GA 30047

Title: D () Delete
Name: OETINGER, MIKE
Address: 2485 EMERALD RIDGE CT.
City-St-Zip: ATLANTA, GA 30345

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: () Change () Addition
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Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: KEITH SMITH

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date