# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 03, 2008**
**Secretary of State**

DOCUMENT# P07000108140

**Entity Name:** DIRECT LINE OF GEORGIA, INC.

**Current Principal Place of Business:**

818 A1A NORTH
SUITE 300
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

818 A1A NORTH
SUITE 300
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAX CO
50 NORTH LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

HORNE, KAROL D MGR
818 A1A NORTH
SUITE 300
PONTE VEDRA BEACH, FL 32082 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: KAROL D HORNE 04/03/2008
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Change (X) Addition
Name: HORNE, DONIS P PD
Address: 818 A1A NORTH SUITE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD ( ) Change (X) Addition
Name: HORNE, ELLIOTT S VD
Address: 818 A1A NORTH SUITE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: ST ( ) Change (X) Addition
Name: BROWNFIELD, THOMAS R ST
Address: 818 A1A NORTH SUITE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: DONIS P HORNE PD 04/03/2008
Electronic Signature of Signing Officer or Director Date