2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State

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DOCUMENT # P10763 1. Entity Name GPC SECURITIES, INC.			S. William			05-04-2006 ! • • • • • • • • • • • • • • • • • • •	90224 010 ***15	50.00
Principal Plan	ce of Business				00020			
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1201 PEACHTREE ST. 1201 PEACHTREE ST.								
STE. 2200 STE. 2200								
ATLANTA, G	A 30361	ATLANTA, GA 30361					OZONI OVONI OVONI OVENI OVENI CIJ	I (1861 11 1861
		1 - 44 111						
	Place of Business	3. Mailing Address 1201 Peachtree Street				0 0 0 0 0 0 0 0 0 0		
	Peachtree Street							
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		04262006	Chg-P	CR2E034 (11/05)		
2200		2200			3123233		,	
City & Sta	te	City & State		4. FEI Number	•	A	pplied For	
Atlanta	a GA	Atlanta GA	Atlanta, GA		NOT APPLICABLE			ot Applicable
		Zip 30361 Country		LISA			□ \$8.75 Ad	ditional
, 30	30361 Country USA Zip 30361 Co			004	5. Certificate of	of Status Desired	Fee Require	
-	6. Name and Address of Curren	<u> </u>		7. Name and	Address of New Re	agistered Agent		
	or realist and realist and an object of the control			7. Name and Address of New Registered Agent Name no change				
CTCOPP	ODATION SYSTEM			no change				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)				
	ION, FL 33324							
LOSIVIAI	1014, FE 33324							•
								·····
				City			FL Zip Cod	ie
D. The object		for the express of changing its		office or region	tared exect or best	in the Ctate of Ele	side. I am familiar with	224 22222
	e named entity submits this statement ations of registered agent.	for the purpose of changing its	regisiereo	onice or regis	hered agent, or both	i, in the State of Flo	nga. Tam lanililar wim	, апо ассері
the oblige	atons of registered agent.							
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable (NOT)	E. Registered A	gent signature requi	ered when reinstaurig)		DATE	
E.,	E NOW!!! EEE 10 \$450.00	9. Election Campai	ign Financii	ng \$	5.00 May Be			
	LE NOW!!! FEE IS \$150.00 lay 1, 2006 Fee will be \$550	.00 Trust Fund Cont	tribution.		dded to Fees			
10.	10. OFFICERS AND DIRECTORS					CHANGES TO OFFI	CERS AND DIRECTOR	RS IN 11
TITLE	DV X Delete 1		TITLE	C	EOD		☐ Change	X Addition
NAME	KAWAKAMI, BRIAN		NAME	l C	nthia Hayes			
STREET ADDRESS	1166 AVE OF THE AMERICAS		STREET	, ,	400 Merrill Lynch Drive			
CITY-ST-ZIP	NEW YORK, NY 10036		CITY-ST		ennington, NJ			
		ND = .	TITLE	<u> </u>	emington, 140	00004		Sel Addition
TITLE	55.00			1 '			☐ Change	X Addition
NAME					Mark D. Alexander			
SIREET ADDRESS 1201 PEACHTREE ST., NE SUITE 2200				1AODRESS 1600 Merrill Lynch Drive				
CITY-ST-ZIP	ATLANTA, GA 30361		CITY-ST	r-zip Po	ennington, NJ	08534		
TITLE	S	☐ Delete	TITLE	D	_		☐ Change	X Addition
NAME	LONTZ, ALISON C		NAME	м	lichael Falcon			
STREET ADDRESS			STREET	ADDRESS 14	1400 Merrill Lynch Drive			
CITY-SI-ZIP ATLANTA, GA 30361			CITY-ST		Pennington, NJ 08534			
			-					
TITLE	T	☒ Delete	TITLE				☐ Change	★ Addition
NAME	MOOTS, MARK		NAME		lichelle Godfre			
STREET ADDRESS			1		201 Peachtre	St, Suite 220	00	
CITY-ST-ZIP	ATLANTA, GA 30309		CITY-SE	A	tlanta, GA 300	361		
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAME	ļ				-
STREET ADDRESS	; [ADDRESS				
CITY-ST-ZIP			CITY - S1					
	-						☐ Chann	Addition
TIFLE		☐ Delete	TITLE				☐ Change	L'I VOOIDOU
NAME			NAME	- 1				
CIDELL ADDOLCO			133012					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report ovsupplemental report is true and eccurate 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 ecciver 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 withhall puter the empowered.

CITY - ST - ZIP

SIGNATURE:

CITY-S1-ZIP

ALISON C. LONTZ

AME OF SIGNING OFFICER OR DIRECTOR

Z

04/26/06

404-892-8722

Daytime Phone #