

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13330

FILED  
Jan 25, 2011  
Secretary of State

**Entity Name:** GRESHAM & ASSOCIATES, INC.

**Current Principal Place of Business:**

ONE GRESHAM LANDING  
STOCKBRIDGE, GA 30281 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 927  
STOCKBRIDGE, GA 30281 US

**New Mailing Address:**

**FEI Number:** 58-1367775

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORNWELL, DEBBIE  
360 COLUMBIA DRIVE SUITE 105  
PALM BCH.GARDENS, FL 33409 US

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

PORTER, BETTY  
10201 CENTURION PARKWAY NORTH  
500  
JACKSONVILLE, FL 32256 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:** BETTY PORTER

01/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GRESHAM, JAMES A.  
**Address:** ONE GRESHAM LANDING  
**City-St-Zip:** STOCKBRIDGE, GA 30281

**Title:** ST  
**Name:** GRESHAM, GAIL S.  
**Address:** ONE GRESHAM LANDING  
**City-St-Zip:** STOCKBRIDGE, GA 30281

**Title:** D  
**Name:** ABERNATHY, GEORGE  
**Address:** ONE GRESHAM LANDING  
**City-St-Zip:** STOCKBRIDGE, GA 30281

**Title:** CEO  
**Name:** GRESHAM, JAMES V  
**Address:** ONE GRESHAM LANDING  
**City-St-Zip:** STOCKBRIDGE, GA 30281

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES V. GRESHAM

CEO

01/25/2011

Electronic Signature of Signing Officer or Director

Date