

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22668

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: THE SCRUGGS COMPANY

**Current Principal Place of Business:**

P. O. BOX 2065  
VALDOSTA, GA 31604

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2065  
VALDOSTA, GA 31604

**New Mailing Address:**

FEI Number: 58-0952077      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

FRIEDMAN, MARTIN S.  
2548 BLAIRSTONE PINES DRIVE  
TALLAHASSEE, FL 32301      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: VS ( ) Delete  
Name: WISENBAKER, LARRY  
Address: 4679 OLD HWY 41 NO.  
City-St-Zip: HAHIRA, GA 31632

Title: P ( ) Delete  
Name: SCRUGGS, FERRELL JR  
Address: 4679 OLD HWY 41 NO.  
City-St-Zip: HAHIRA, GA 31632

Title: AS ( ) Delete  
Name: DOWNING, SUSAN G  
Address: 4679 OLD HWY 41 NO.  
City-St-Zip: HAHIRA, GA 31632

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

Title: VP (X) Change ( ) Addition  
Name: WISENBAKER, LARRY  
Address: 4679 OLD HWY 41 NO.  
City-St-Zip: HAHIRA, GA 31632

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 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: LARRY WISENBAKER

VP

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date