

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P27180

1. Entity Name
WOLVERINE PROPERTY COMPANY



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 APR -7 AM 9:16

Principal Place of Business
6400 POWERS FERRY RD
N.W. SUITE 224
ATLANTA, GA 30339-2949

Mailing Address
2455 PACES FERRY RD
C-20
ATLANTA, GA 30339

2. Principal Place of Business
2455 Paces Ferry Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03162006

Chg-P

CR2E034 (11/05)

City & State
Atlanta GA

City & State

4. FEI Number

58-1824031

Applied For

Not Applicable

Zip
30339

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000072298260

04/07/06--01020--010 **450 00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BLAKE, FRANCIS S
2455 PACES FERRY RD
ATLANTA, GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Assistant Secretary
Jonathan M. Gottsegen
2455 Paces Ferry Road
Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
FERNANDEZ, FRANK L
2455 PACES FERRY RD
ATLANTA, GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Assistant Treasurer
Steven Taplits
2455 Paces Ferry Road
Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
MARSHALL, RICHARD
2455 PACES FERRY RD
ATLANTA, GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Assistant Treasurer
Rebecca J. Flick
2455 Paces Ferry Rd.
Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT
TOME, CAROL
2455 PACES FERRY RD
ATLANTA, GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
FADELL, RITA L
2455 PACES FERRY RD
ATLANTA, GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
BRISENDINE, L BRILEY
2455 PACES FERRY RD
ATLANTA, FL 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jonathan M. Gottsegen 3-16-06 770-384-2858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #