

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P37649

FILED
Mar 22, 2010
Secretary of State

Entity Name: VERSA MANAGEMENT SYSTEMS, INC.

Current Principal Place of Business:

3400 PLAYERS CLUB PARKWAY
MEMPHIS, TN 38125 US

New Principal Place of Business:

3033 MAPLE DRIVE
ATLANTA, GA 30305 US

Current Mailing Address:

3400 PLAYERS CLUB PARKWAY
MEMPHIS, TN 38125 US

New Mailing Address:

3033 MAPLE DRIVE
ATLANTA, GA 30305 US

FEI Number: 36-2989060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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

OFFICERS AND DIRECTORS:

Title: VP
Name: SMOCK, JEFF MR
Address: 3033 MAPLE DRIVE
City-St-Zip: ATLANTA, GA 30305 US

Title: PD
Name: PHILP, BROCK MR
Address: 180 SHERWOOD PLACE
City-St-Zip: NEWMARKET, ON L3Y 8E5 CN

Title: VP
Name: GOTTLIEB, THOMAS MR
Address: 551 ST CLEMENTS AVENUE
City-St-Zip: TORONTO, ON M5N 1M5 CN

Title: STD
Name: KLOPFER, KYLE MR
Address: 3033 MAPLE DRIVE
City-St-Zip: ATLANTA, GA 30305 US

Title: VPD
Name: REED, CHRIS MR
Address: 3033 MAPLE DRIVE
City-St-Zip: ATLANTA, GA 30305 US

Title: VP
Name: RIDDELL, BRENDA MS.
Address: 100 BOOTH DRIVE
City-St-Zip: STOUFFVILLE, ON L4A 4K4 CN

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: BROCK PHILP

PD

03/22/2010

Electronic Signature of Signing Officer or Director

Date