2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39201

City-St-Zip:

DULUTH, GA 30097

FILED Jan 12, 2009 Secretary of State

Entity Name: WOLVERTON AND ASSOCIATES, INC. **Current Principal Place of Business: New Principal Place of Business:** 6745 SUGARLOAF PARKWAY STE 100 **DULUTH, GA 30097 New Mailing Address: Current Mailing Address:** 6745 SUGARLOAF PARKWAY STE 100 **DULUTH, GA 30097** FEI Number: 58-1856221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: (X) Change () Addition WOLVERTON, JR, JERRY C CEO Name: WOLVERTON, JR, JERRY C PRES Name: 2265 WOODLAND LAKE WALK 2265 WOODLAND LAKE WALK Address: Address: SNELLVILLE, GA 30078 City-St-Zip: SNELLVILLE, GA 30078 City-St-Zip: () Delete Title: Title: () Change () Addition Name: WOLVERTON, ANNA M SECTRES Name: 2265 WOODLAND LAKE WALK Address: Address:

SNELLVILLE, GA 30078 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete VΡ

BUCKEL, ANDREW D VP BUCKEL, ANDREW D VP Name: Name: 1745 CHATTAHOUCHEE RUN DR 1745 CHATTAHOOCHEE RUN DR Address: Address:

City-St-Zip: SWANEE, GA 30024 City-St-Zip: SUWANEE, GA 30024

Title: VΡ () Delete Title: () Change () Addition MACRINA, JOSEPH R VP Name: Name: Address: 10823 GLENLEIGH DRIVE Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: SUSAN M. EARNEY **ACCT** 01/12/2009