2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2012
Secretary of State

DOCUMENT# P94000055232

Entity Name: CAPITAL CITY SERVICES COMPANY

Current Principal Place of Business:

1860 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

217 N. MONROE STREET
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3277391 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, J. KIMBROUGH
217 N. MONROE 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: CD
Name: SMITH, WILLIAM G JR.
Address: 217 N. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: STD
Name: DAVIS, J. KIMBROUGH
Address: 217 N. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: P
Name: CORUM, BETHANY H
Address: 1860 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: BARRON, THOMAS A
Address: 217 N. MONROE STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: V
Name: NEWMAN, MARK
Address: 1860 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: V
Name: AINSWORTH, MICHAEL P
Address: 1860 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

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: J. KIMBROUGH DAVIS CFO 02/07/2012

Electronic Signature of Signing Officer or Director — Date