2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008257

Entity Name: JAMES DORAN COMPANY OF FLORIDA

FILED Jun 30, 2006 Secretary of State

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Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
SUITE 200	N FARMS DRI) STON, SC 294					
	lailing Addres		New Maili	New Mailing Address:		
216 SEVE SUITE 200	N FARMS DRI	VE				
FEI Number	: 58-2322093	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND ROAD				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATU	RE:					
	Electror	ic Signature of Registered Age	ent	Date		
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DORAN JR RO	RMS DRIVE, SUITE 200	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DORAN, SHAN	RMS DRIVE, SUITE 200	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	LOVETT, REBE	RMS DRIVE, SUITE 200	Title: Name: Address: City-St-Zip:		(X) Change () Addition ERYL FARMS DRIVE, SUITE 200 ON, SC 29492	
Title: Name:	AS () BROOKS, GRE	Delete G W	Title: Name:	AS BROOKS, G	(X) Change()Addition GREG W	

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT J. DORAN, JR. DP 06/30/2006

612 MORELAND AVENUE, SE STE 100

ATLANTA, GA 30316

Address:

City-St-Zip:

119 FIFTH AVENUE, 3RD FLOOR

NEW YORK, NY 10003