

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852035

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: ODELL ASSOCIATES INC.

**Current Principal Place of Business:**

525 N. TRYON STREET  
CHARLOTTE, NC 28202

**New Principal Place of Business:**

800 WEST HILL STREET  
3RD FLOOR  
CHARLOTTE, NC 28208

**Current Mailing Address:**

525 N. TRYON STREET  
CHARLOTTE, NC 28202

**New Mailing Address:**

800 WEST HILL STREET  
3RD FLOOR  
CHARLOTTE, NC 28208

FEI Number: 56-0952726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEOD ( ) Delete  
Name: GRIFFIN, ROBERT G  
Address: 2141 SEDLEY ROAD  
City-St-Zip: CHARLOTTE, NC 28211

Title: VPSD ( ) Delete  
Name: MCLELLAN, WILLIAM C  
Address: 2542 FOREST DRIVE  
City-St-Zip: CHARLOTTE, NC 28211

Title: VC (X) Delete  
Name: CARROLL, MARLEY P  
Address: 501 MONCURE DRIVE  
City-St-Zip: CHARLOTTE, NC 28209

Title: CFOD ( ) Delete  
Name: GRAY, MAX  
Address: 5201 SUNNINGDALE DRIVE  
City-St-Zip: CHARLOTTE, NC 28277

Title: PD ( ) Delete  
Name: SNYDER, JAMES  
Address: 9202 UNIVERSITY BLVD.  
City-St-Zip: RICHMOND, VA 23229

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEOD (X) Change ( ) Addition  
Name: GRIFFIN, ROBERT G  
Address: 800 WEST HILL STREET, 3RD FLOOR  
City-St-Zip: CHARLOTTE, NC 28208

Title: VPSD (X) Change ( ) Addition  
Name: MCLELLAN, WILLIAM C  
Address: 800 WEST HILL STREET, 3RD FLOOR  
City-St-Zip: CHARLOTTE, NC 28208

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MAX E. GRAY

CFOD

04/18/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date